

## M&amp;R OVERTIME AUTHORIZATION REQUEST

MSTS FORM 5330/3 (REV. 7-63)

FROM:

Master, USNS Gen. John Pope (T-AP 110)

REQUEST NO.

DATE 29 December 1966

TO:

Commander Military Sea Transportation Service, Pacific

## INSTRUCTIONS

1. The above "REQUEST NO." will consist of the bow number and two digits representing FY followed by a sequence number of the request. (Example: T-AK 264-64-16.)
2. Cost of work covered by this request is chargeable to Account 5180 only after this form has been approved by cognizant Maintenance and Repair Officer.
3. Submit three copies when cost estimate is less than \$1000, four copies if cost estimate is above \$1000. Cognizant command will retain one copy and return approved (two or three) to applicable ship. Upon completion of the work, the "COMPLETION REPORT" section shall be prepared. After preparation of this section one copy shall be retained aboard ship and one or two copies (as applicable) returned ashore. The work shall be inspected by an Assistant Port Engineer as indicated on this form. When costs exceed \$1000, one copy fully executed shall be forwarded to COMSTS.

## DESCRIPTION OF WORK

Install four (4) 100 Amp, 600 Volt, Double Pole Single Throw unfused disconnect switches to Fry Kettles in Troop Galley. Switches to be mounted on bulkhead outside galley. Old Cable (D-30) to be rerouted, cut in and hooked up in switches. New cable (D-30) approximately 300 feet to be pulled from fuse box to switches, cut in and hooked up.

JUSTIFICATION: Under present arrangement Fry Kettles can not be secured individually but must all be secured from breaker on "B" Board.

REFERENCE: Coast Guard Manual 259, Page 111, Section 65-50, Para. (b)

ESTIMATED MAN HOURS	ESTIMATED COST	MASTER (Signature)
100	\$350.00	<i>G. W. Berlin</i> G. W. BERLIN, MASTER

## APPROVAL

FROM:	TO:
Commander Military Sea Transportation Service, <u>Pacific Area</u>	Master, USNS <u>POPE (T-AP 110)</u>
OVERTIME FUNDS (Account 5180)	M&R PROJECT NO.

*\$350.00* *710-709*

1. The overtime funds requested are hereby approved for completion of the above M&R project. The project number indicated will be used to identify all overtime work. Material costs will be borne by ship's operating budget. Funds not required to complete this work will not be used for other work unless specifically approved as another M&R project.

ASSISTANT PORT ENGINEER (Initials)	DATE	M&R OFFICER (Signature)	<input type="checkbox"/> APPROVED	<input type="checkbox"/> DISAPPROVED *	DATE
<i>AC</i>	<i>1-4-1967</i>	<i>G. W. Berlin</i>	<input type="checkbox"/>	<input type="checkbox"/>	<i>1-4-1967</i>

## COMPLETION REPORT

DATE COMPLETED	OVERTIME EXPENDITURE	MATERIAL COST
<input type="checkbox"/> The above M&R project was completed.		
<input type="checkbox"/> The above M&R project will not be completed because:		

\* Explanation required:

MASTER (Signature)

## INSPECTION REPORT

The above M&R project was inspected this date and found to be satisfactorily completed.

DATE	ASSISTANT PORT ENGINEER (Signature)