TRANSFER AND ACCEPTANCE OF DoD REAL PROPERTY

Form Approved
OMB No. 0704-0188

The public reporting burden for this collection of information is estimated to average 30 minutes per response, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. Send comments regarding this burden estimate or any other aspect of this collection of information, including suggestions for reducing the burden, to the Department of Defense, Washington Headquarters Services, Executive Services Directorate, Information Management Division, 4800 Mark Center Drive, Alexandria,VA 22350-3100 (0704-0188). Respondents should be aware that notwithstanding any other provision of law, no person shall be subject to any penalty for failing to comply with a collection of information if itdoes not display a currently valid OMB control number.

PLEASE DO NOT RETURN YOUR COMPLETED FORM TO THE ABOVE ORGANIZATION.

1. FROM *(Organization Name)*
NAVFAC Mid Atlantic
9324 Virginia Ave; Building Z-144, Room 214
Norfolk, VA 23511

2. DATE PREPARED *(YYYYMMDD)*
20150811

3. PROJECT/JOB NUMBER
P827

4. SERIAL NUMBER

5. TO *(Organization - Installation Code and Name)*
Public Works Department, Naval Station Great Lakes
2530 Ziegemeier Street
Great Lakes, IL 60088

6. RPSUID/SITENAME/ INSTCODE/INSTNAME
N00128/NAVAL STN GREAT LAKES

7. CONTRACT NUMBER(S)

7a. PLACED-IN-SERVICE DATE *(YYYYMMDD)*

8. TRANSACTION DETAILS

a. METHOD *(X all that apply)*
- [X] ACQUISITION BY CONSTRUCTION
- [ ] TRANSFER BETWEEN SERVICES
- [ ] CAPITAL IMPROVEMENT
- [ ] INVENTORY ADJUSTMENT

b. WHEN/EVENT *(X one)*
- [ ] TOTAL ASSET PLACED-IN-SERVICE
- [ ] PARTIAL ASSET PLACED-IN-SERVICE

c. TYPE *(X one)*
- [X] DRAFT
- [ ] FINAL
- [ ] INTERIM

9. ITEM NO.	10a. FACILITY NO.	10b. RPUID	11. CATEGORY CODE	12. CATCODE DESCRIPTION	13. TYPE CODE	14. SUST. CODE	AREA 15. PRIMARY UM	AREA 16. PRIMARY UM QUANTITY	OTHER 17. SECONDARY UM	OTHER 18. SECONDARY UM QUANTITY	19. COST	20. FUND SOURCE	21. FUND ORG	22. INTER-EST CODE	23. ITEM REMARKS

24. STATEMENT OF COMPLETION. The facilities listed hereon are in accordance with maps, drawings, and specifications and change orders approved by the authorized representative of the using agency except for the deficiencies listed on the reverse side.

a. TRANSFERRED BY *(Typed Name and Signature)*
NAVFAC MID-ATLNATIC

b. DATE SIGNED *(YYYYMMDD)*

c. TITLE *(Area Engr./Base Engr./DPW/Construction Agent)*
PWO, NAVAL STATION GREAT LAKES

25a. ACCEPTED BY *(Typed Name and Signature)*

b. DATE SIGNED *(YYYYMMDD)*

c. TITLE *(DPW/RPAO)*

26. PROPERTY VOUCHER NUMBER

27. **CONSTRUCTION DEFICIENCIES** *(Attach blank sheet for continuations)*	28. **PROJECT REMARKS** *(Attach blank sheet for continuations)*

INSTRUCTIONS

GENERAL. This form has been designed and issued for use in connection with the transfer of military real property between the military departments and to or from other government agencies. It supersedes ENG Forms 290 and 290B (formerly used by the Army and Air Force) and NAVDOCKS Form 2317 (formerly used by the Navy).

Existing instructions issued by the military departments relative to the preparation of DD Form 1354 are applicable to this revised form to the extent that the various items and columns on the superseded forms have been retained. The military departments may promulgate additional instructions, as appropriate.

For detailed instructions on how to fill out this form, please refer to Unified Facilities Criteria (UFC) 1-300-08, dated 16 April 2009 or later.

SPECIFIC DATA ITEMS.

1. From. Name of the transferring agency.

2. Date Prepared. Date of actual preparation. Enter all dates in YYYYMMDD format (Example: March 31, 2010 = 20100331).

3. Project/Job Number. Project number on a DD Form 1391 or Individual Job Order Number.

4. Serial Number. Sequential serial number assigned by the preparing organization (e.g., 2010-0001).

5. To. Name and address of the receiving installation, activity, and Service of the Real Property Accountable Officer (RPAO).

6. RPSUID/SITENAME/INSTCODE/INSTNAME. Site Unique Identifier and name or installation code and name where the constructed facility is located.

7. Contract Number(s). Contract number(s) for this project.

7a. Placed-In-Service Date. RPA Placed In Service Date. This is the date the asset is actually placed-in-service.

8. Transaction Details.

a. Method of Transaction. Mark (X) as many boxes as apply.
b. When/Event. When or event causing preparation of DD Form 1354. X only one box.
c. Type. Draft, interim, or final DD Form 1354. X only one box.

9. Item Number. Use a separate item number for each facility, no item number for additional usages.

10a. Facility Number. Assigned in accordance with the Installation/Base Master Numbering Plan.

10b. RPUID. Identified in Real Property Inventory.

11. Category Code. The category code describes the facility usage.

12. Catcode Description. The category code name which describes the facility usage.

13. Type. Type of construction: P for Permanent; S for Semi- permanent; T for Temporary.

14. Sustainability Code. Reports whether or not an asset meets the sustainability guidelines set forth in Section 2(g) of Executive Order 13514. Valid values are: 1 (asset meets the guidelines); 2 (asset does not meet the guidelines); 3 (asset not evaluated); 4 (asset not subject to guidelines).

15. Area: UM 1. Area unit of measure; use the unit of measure associated with the category code selected in 11.

16. Total Quantity UM 1. The total area for the measure identified in Item 15. Use negative numbers for demolition.

17. Other: UM 2. Unit of Measure 2 is the capacity or other measurement unit (e.g., LF, MB, EA, etc.).

18. Total Quantity UM 2. The total capacity/other for the measure identified in Item 17.

19. Cost. Cost for each facility; for capital improvements to existing facilities, show amount of increase only. If there is no increase for the capital improvement, enter N/A.

20. Fund Source. Enter the Fund Source Code for this item.

21. Funding Organization. Enter the code for the organization responsible for acquiring this facility.

22. Interest Code. Enter the code that reflects government interest or ownership in the facility.

23. Item Remarks. Remarks pertaining only to the item number identified in Item 9; show cost sharing.

24. Statement of Completion. Typed name, signature, title, and date of signature by the responsible transferring individual or agent.

25. Accepted By. Typed name, signature, title, and date of signature by the RPAO or accepting official.

26. Property Voucher Number. Next sequential number assigned by the RPAO in voucher register.

27. Construction Deficiencies. List construction deficiencies in project during contractor turnover inspection.

28. Project Remarks. Project level remarks and continuation of blocks.