

DEPARTMENT OF HOMELAND SECURITY
UNITED STATES COAST GUARD
HOUSING WORK REQUEST FORM

Submitted by:		Date:	
Housing Area:			
Work Phone:		Cell Phone:	
Email Address:			
Housing Address:			

PROBLEM DESCRIPTION / DETAILS

NOTE: Once your Work Request is approved, it will be forwarded to the appropriate Engineering Shop for action.

INSTRUCTION ON HOW TO SUBMIT FORM

1. Prior to sending the form via the "Email Form" button, save the file as "SNNE / SFO SWH HSG WR" onto your desktop.
2. Send the "SNNE / SFO SWH HSG WR" file by clicking on the "Email Form".
3. Someone from Sector New England will inform you via email that your work request has been received.

DISCLAIMER

The information requested here is not subject to the Paperwork Reduction Act (codified at 44 U.S.C. Chapter 35, as amended) because it is requested from U.S. Coast Guard members (or their dependants acting as a member's representative) for housing service purposes only.

PRIVACY ACT STATEMENT

Authority: COMDTINST M11101.13G authorizes the collection of this information.

Purpose: The Coast Guard will use this information to receive work requests from CG Owned Housing occupants.

Routine Uses: The information will be used by and disclosed to Coast Guard Housing personnel to respond in providing repairs and services to CG Owned Housing occupants.

Disclosure: Furnishing this information is voluntary; however, failure to furnish the requested information may delay or prevent responding to your work request.

ITEMS BELOW TO BE COMPLETED BY HOUSING MAINTENANCE TEAM ONLY

☐	Approved	☐	Disapproved	☐	Pending	Shop / Contractor Assigned WR:
Date:						
Technician Assigned:						Man-Hours:
Material Cost:						Contractor Cost:
Estimated Completion Date:						Completion Date: