

680

**CAPACITY ANALYSIS:
DATA CALL WORK SHEET FOR
RESERVE**

COMMANDS/CENTERS: NAVRESCEN Jackson, MS

ACTIVITY UIC: N61955

Category Personnel Support

Sub-category Reserve Command/Centers

Types Naval and Marine Corps Reserve Command/Centers and Facilities

*****If any responses are classified, attach separate classified annex*****

ORIGINAL



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1 INTRODUCTION

Introduction

1. Purpose. This introduction provides general instructions for replying to this data call; individual questions and footnotes give specific instructions for completion of tables, computations, etc.

2. References

a. Refer to the NAVFAC P-72 for Facility Category Code Numbers (CCNs).

b. NAVFAC P-80 provides a discussion of the general nature of each CCN; use it to delineate "types" of facilities that share a common CCN.

3. Definition of Terms. For purposes of this data call the following apply:

a. A Facility is a space (e.g. a room), a defined area (e.g. a range), a structure (e.g. a building), or a structure other than a building (e.g. an obstacle course); it is possible for a building to house one or more facilities of different types.

b. The Category Code Number (or CCN) for Reserve Training Buildings is CCN 171-15. Category Code 171 - Supplement Naval and Marine Corps Reserve Training, as outlined in NAVFAC P-80 is the reference source for facilities available for training at Reserve Training Buildings.

4. Coordinating Instructions

a. Enter the primary UIC of the data call respondent at the top of each page of the response; ensure that additional pages created include this identifier.

b. Where information about current facilities available is requested, include MILCON projects that are not BRAC related, which have been authorized and appropriated and for which contracts are to be awarded by 30 September 1994; do not include projects submitted in the FY 95 Presidential Budget. Proposed MILCON projects in support of previous BRAC decisions should be included in response by gaining activities but excluded from closing or losing activities.

c. If any of the information requested is subject to change between now and the end of Fiscal Year 2001 due to known redesignations, realignments/closures or other action, provide current and projected data and so annotate.

Introduction (Cont.)

d. Tenant activities of a Reserve Training Center that use space must be accounted for under the Reserve Command/Center UIC for all courses taught and classroom space utilized.

e. "Throughput" figures should include that from all sources (DON, other DoD, reserve



and/or active components, and non-DoD).

f. Use "N/A" to respond to a question and/or table that does not apply; provide the reason(s) why it is not applicable.

i. Provide best estimates where projections of future requirements are requested.

SPECIAL INSTRUCTIONS CONCERNING INTERPRETATION OF ATTACHED INPUT:

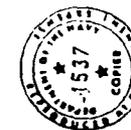
Per para 4.c. of the "Coordinating Instructions", the information provided herein is based upon current facilities located in Jackson, Mississippi. As of September 1995, NAVRESCEN Jackson will move approximately 100 miles east to Meridian, Mississippi, be redesignated as NAVRESCEN Meridian, and become a tenant command aboard Naval Air Station (NAS) Meridian. This project is not a MILCON project, but nonetheless has been authorized and appropriated for FY-95.

The move to Meridian will have little to no impact on the majority of the information requested in this Data Call; that is we do not anticipate any significant fluctuation in our drilling population as a result of this move. Furthermore, the new facility we will occupy in Meridian is nearly identical in square footage to our current facility and therefore answers to any questions concerning facilities will be valid for both geographical locations.

Finally, in regards to a good portion of the questions herein, "projected" answers for FY 96 and beyond (i.e. from a NAS Meridian location perspective) are addressed from a "tenant command" view for two reasons: First and foremost, as a future tenant command of NAS Meridian (UIC: 43324), I interpret my command (UIC: 61955) and its associated resources to be my building, its immediate grounds, and some limited parking spaces; not the "base" as a whole. Secondly, providing such information from an NAS Meridian perspective would be a duplication of effort, as NAS Meridian (UIC: 43324) has provided this identical information via their BRAC 95 Data Call package.


J. A. SLAY
LCDR USNR





MISSION REQUIREMENTS:

A. AUTHORIZED/DIRECTED DRILL UTILIZATION

1. For all units (Department of the Navy and non-Department of the Navy) that train at your command/center give, by type of training facility (drill space), the number of facility (drill space) hours of training that was conducted in FY 1992 and FY 1993, and the number of facility hours that will be required to meet future Authorized/Directed Drill Utilization. A facility hour is equal to the number of facilities uses times the number of weekend hours per year the facility was occupied. For example, if a Reserve Center conducts training in 3 classrooms, 50 weekends a year for 16 hours, the classroom hours would be 3 x 16 x 50 = 2,400 classroom hours worth of training. Designate "other" by 171-15 type or other CCN.

TYPE OF FACILITY	HISTORIC Training Hours per year		PROJECTED Training Hours per year				
	1992	1993	1994	1995	1997	1999	2001
Classrooms	2880	2880	2720	1920	1920	1920	1920
Assembly Hall	64	64	64	48	48	48	48
Conference/Classroom	64	64	64	48	48	48	48
Multi-Media Center	0	0	0	0	0	0	0
Team Training	0	0	0	0	0	0	0
Armory	0	0	0	0	0	0	0
Other (designate)							

R

Data Call 48 680 R

Duplicate all charts as necessary.

3 Bay 94



MISSION REQUIREMENTS:

A. AUTHORIZED/DIRECTED DRILL UTILIZATION

1. For all units (Department of the Navy and non-Department of the Navy) that train at your command/center give, by type of training facility (drill space), the number of facility (drill space) hours of training that was conducted in FY 1992 and FY 1993, and the number of facility hours that will be required to meet future Authorized/Directed Drill Utilization. A facility hour is equal to the number of facilities uses times the number of weekend hours per year the facility was occupied. For example, if a Reserve Center conducts training in 3 classrooms, 50 weekends a year for 16 hours, the classroom hours would be $3 \times 16 \times 50 = 2,400$ classroom hours worth of training. Designate "other" by 171-15 type or other CCN.

TYPE OF FACILITY	HISTORIC Training Hours per year		PROJECTED Training Hours per year				
	1992	1993	1994	1995	1997	1999	2001
Classrooms	2880	2880	2720	1920	1920	1920	1920
Assembly Hall	64	64	64	48	48	48	48
Conference/Classroom	64	64	64	48	48	48	48
Multi-Media Center	0	0	0	0	0	0	0
Team Training	0	0	0	0	0	0	0
Armory	0	0	0	0	0	0	0
Other (designate)							

Duplicate all charts as necessary.



2. Throughput. For each type of drill space utilization in response to question 1, Give the annual student throughput, (i.e. number of reservists utilizing the type of facility (drill space) or the expected throughput, for the fiscal years indicated.

TYPE OF FACILITY	Historic Throughput		PROJECTED THROUGHPUT (Fiscal Year)				
	1992	1993	1994	1995	1997	1999	2001
Classrooms							
Assembly Hall	9,525	9,248	9,248	6,528	6,528	6,528	6,528
Conference/Classroom	13,447	13,056	13,056	9,792	9,792	9,792	9,792
Multi-Media Center							
Team Training							
Shops							
Armory							
Other (designate)							
Conference Room	791	768	768	288	288	288	288

*NOTE: Since "Throughput" guidance or formula is not available, input provided was derived by taking 80% of our average drilling population of 170 personnel (or 136) and multiplying that figure by each use of a space to complete a training evolution, regardless of the time involved. Conference Room figure included planning and conferences and assumed an average drilling population of 12.



3. By Category, list the Actual Manning Level and Authorized Navy Reserve Billets historically and projected for the year indicated.

CATEGORY	FY 1992		FY 1993		FY 1994		FY 1995		FY 1997		FY 1999		FY 2001	
	ACTUAL MANNING LEVEL	AUTHORIZED BILLETS	ACTUAL MANNING LEVEL	AUTHORIZED BILLETS	ACTUAL MANNING LEVEL	AUTHORIZED BILLETS	ACTUAL MANNING LEVEL	AUTHORIZED BILLETS						
NUMBER OF SELRES	271 251	166 125	278 251	136 125	235 251	282 178	238 251	288 142	260	260	260	260	260	260
NUMBER OF TARs	8	8	8	8	8	8	8	8	9	9	9	9	9	9
USN	10	10	10	10	0	10	10	10	10	10	10	10	10	10

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Jackson, MS



4. By Category, list the Actual Manning Level and Authorized Marine Corps Billets historically and projected for the year indicated. N/A (NO MARINE CORPS BILLETS).

CATEGORY		FY 1992	FY 1993	FY 1994	FY 1995	FY 1997	FY 1999	FY 2001
NUMBER OF USMCR	ACTUAL MANNING LEVEL							
	AUTHORIZED BILLETS							
NUMBER OF FTS	ACTUAL MANNING LEVEL							
	AUTHORIZED BILLETS							
USMC	ACTUAL MANNING LEVEL							
	AUTHORIZED BILLETS							



6. Authorized/Directed Drill Utilization Areas. Provide any land and water area requirements for reserve Authorized/Directed Drill Utilization conducted by your Reserve Command/Center, include landing zones (LZs), gun firing positions (GPs), etc. that are scheduled individually, and impact areas. List utilized areas for each use.

Training Area(s)	Type of Training	Hours per fiscal year
NONE		



7. List the Reserve Units assigned to your Reserve Center. Indicate the number of billets authorized and the actual manning for each Unit historically and projected.
a.

NAVY UNITS	BILLETS AUTHORIZED/ACTUAL MANNING NAVAL RESERVE CENTER, JACKSON, MISSISSIPPI									
	FY 1993		FY 1995		FY 1997		FY 1999		FY 2001	
	BILLETS	MANNING	BILLETS	MANNING	BILLETS	MANNING	BILLETS	MANNING	BILLETS	MANNING
FFG-20 ANTRIM 2009	8	57	8	57	8	57	8	57	8	57
4 FSSGMBNMDCO E DET 1	13	18	0	0	0	0	0	0	0	0
MOBASCONTGRP 0905	0	14	0	3	0	3	0	3	0	3
NMCB 28 DET 1028	1	33	1	39	1	39	1	39	1	39
NCSO NLA D1 309	35	20	0	0	0	0	0	0	0	0
NAVACTS UK 209	15	55	15	63	15	63	15	63	15	63
VOLTRAUNIT 0905	0	9	0	8	0	8	0	8	0	8
FH 500 COMMZ-11 DET I	48	56	2	40	2	40	2	40	2	40
FH COMMZ 11 DET P0935A	9	10	0	0	0	0	0	0	0	0
LSO MEMPHIS 209	7	6	7	6	7	6	7	6	7	6
AS-18 ORION 918	0	0	34	0	34	0	34	0	34	0
FF-1040 GARCIA 4009	0	0	51	0	51	0	51	0	51	0
FF-1076 FANNING 7609	0	0	130	0	130	0	130	0	130	0
CARGO HDBN 12 DET D 109	0	0	16	0	16	0	16	0	16	0
4FSSG 4MB CCA MSE2A	0	0	13	13	13	13	13	13	13	13
NAV HOSP PENSACOLA 1910	0	0	2	0	2	0	2	0	2	0
NAVHOSP PENSACOLA P1035	0	0	9	9	9	9	9	9	9	9
	136	278	288	238						

b.

MARINE CORPS UNITS	BILLETS AUTHORIZED / ACTUAL MANNING									
	FY 1993		FY 1995		FY 1997		FY 1999		FY 2001	
	BILLETS	MAN- NING	BILLETS	MAN- NING	BILLETS	MAN- NING	BILLETS	MAN- NING	BILLETS	MAN- NING
NONE										

Duplicate this chart as necessary to list all units.



c.

ARMY UNITS	BILLETS AUTHORIZED / ACTUAL MANNING									
	FY 1993		FY 1995		FY 1997		FY 1999		FY 2001	
	BILLETS	MAN-NING	BILLETS	MAN-NING	BILLETS	MAN-NING	BILLETS	MAN-NING	BILLETS	MAN-NING
NONE										

Duplicate this chart as necessary to list all units.



d.

COAST GUARD UNITS	BILLETS AUTHORIZED / ACTUAL MANNING									
	FY 1993		FY 1995		FY 1997		FY 1999		FY 2001	
	BILLETS	MAN- NING	BILLETS	MAN- NING	BILLETS	MAN- NING	BILLETS	MAN- NING	BILLETS	MAN- NING
NONE										

Duplicate this chart as necessary to list all units.



8.

NATIONAL GUARD UNITS	BILLETS AUTHORIZED / ACTUAL MANNING									
	FY 1993		FY 1995		FY 1997		FY 1999		FY 2001	
	BILLETS	MAN- NING	BILLETS	MAN- NING	BILLETS	MAN- NING	BILLETS	MAN- NING	BILLETS	MAN- NING
NONE										

Duplicate this chart as necessary to list all units.



f.

AIR NATIONAL GUARD UNITS	BILLETS AUTHORIZED / ACTUAL MANNING									
	FY 1993		FY 1995		FY 1997		FY 1999		FY 2001	
	BILLETS	MAN- NING	BILLETS	MAN- NING	BILLETS	MAN- NING	BILLETS	MAN- NING	BILLETS	MAN- NING
NONE										

Duplicate this chart as necessary to list all units.



9.

JOINT UNITS	BILLETS AUTHORIZED / ACTUAL MANNING									
	FY 1993		FY 1995		FY 1997		FY 1999		FY 2001	
	BILLETS	MAN- NING	BILLETS	MAN- NING	BILLETS	MAN- NING	BILLETS	MAN- NING	BILLETS	MAN- NING
NONE										

Duplicate this chart as necessary to list all units.





8. List all other users that trained at your Reserve Command/Center facilities on drill weekends.

User	NUMBER OF PERSONNEL PARTICIPATING						
	FY 1992	FY 1993	FY 1994	FY 1995	FY 1997	FY 1999	FY 2001
NONE							

9. What is the average number of weekends per month that the Reserve Center is conducting training?

FOR EIGHT MONTHS OF THE YEAR - 2 WEEKENDS, FOR FOUR MONTHS OF THE YEAR - 1 WEEKEND; FOR A TOTAL OF 16 WEEKENDS A YEAR.

FACILITIES

A. Facilities (Drill Space)

1. Complete the following tables for all of the drill spaces at your Reserve Center. The types of facilities (drill spaces) in the succeeding tables should correspond with that used to identify facility requirements / usage in the Mission Requirements Section of this Data Call. Reproduce the tables as necessary to include all facilities in which training occurs. **Do not include any inadequate facilities. 16 hours per week availability is presumed for all facilities;** in the "Non-Availability" column indicate when the facility cannot be scheduled; and in the "Normally Scheduled for Use" column provide facility usage based on the normal work schedule in force.





2. CCN: 171-15 (Reserve Building). For each general type of facility (drill space), list individually and identify all others designed to support a particular type of Authorized/Directed Drill Utilization. (Non-Availability Weekend Drill Days are the number of regularly scheduled drill days for which the particular drill space could not be utilized for any reason. CCN: 171-15 (A or B)

Type of Authorized/Directed Drill Utilization Facility (drill space)	Number of Facility (drill space)Type	Unique to the Reserve Command/ Center (Y/N)	Non-Availability Weekend Drill Days per year (FY 1993)	Normally Scheduled per drill weekend (FY 1993)	
				Average Utilization (hrs/day)	Average Utilization (hours/yr)
Classrooms:	10	N		8	2575
Assembly Hall	1	Y		2	64
Conference/Classroom	2	N		2	64
Multi-Media Center	0	N			
Team Training	0	N			
Shops	1	N			
Armory	0	N			
Other (designate)					

100-10363-101

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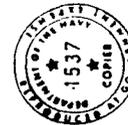
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3. Complete the following table in square feet used, or expected to be used, in each category: *The total should equal the square footage of your Reserve Center.

TYPE OF FACILITY (drill space)	Current Allocation	FY 1995	FY 1996	FY 1997	FY 1998	FY 1999	FY 2000	FY 2001
ADMINISTRATION	5000	5000	5000	5000	5000	5000	5000	5000
CLASSROOMS	7500	7500	7500	7500	7500	7500	7500	7500
TRAINERS								
LABS	1300	1300	1300	1300	1300	1300	1300	1300
SHOPS								
VEHICLE MAINTENANCE BAYS	5000	5000	5000	5000	5000	5000	5000	5000
STORAGE	2890	2890	2890	2890	2890	2890	2890	2890
SUPPLY	1377	1377	1377	1377	1377	1377	1377	1377
Armory								
OTHER								
OTHER CCNs*								
TOTAL SQ. FT.	23067	23067	23067	23067	23067	23067	23067	23067

* Other CCNs owned and operated by the Reserve Center (i.e. 171-35 Operational Trainer Facility, or 171-50 Small Arms Range - Indoor) where training occurs.



4. What major factors preclude full utilization of drill spaces and classroom spaces, e.g., scheduling inefficiencies for classroom, reservist/instructor ratio, availability of instructors, etc.? Historically, what percentage of drill space is vacant because of these factors?

NONE

B. Authorized/Directed Drill Utilization Areas. List all of the Reserve Command/Center land and water utilization areas; include landing zones (LZ)s, gun firing positions (GP)s, etc. that are scheduled individually, and impact areas.

Utilization Areas	Size (Acres)	Number of Personnel involved per event	Non-Availability (FY 1993) (days per year)
NONE			

1. Airspace. List any airspace used by your Reserve Command/Center.

Airspace Name	Dimensions	Scheduling Agency	Controlling Agency
N/A	N/A	N/A	N/A

2. Airfields. List any airfields used by your Reserve Command/Center.

Airfield	Location	Ownership (Service/non-DoD)
N/A	N/A	N/A





Features and Capabilities

A. Expansion

1. Assuming that your Reserve Command/Center is not constrained by operational funding (i.e. personnel support, increased overhead costs, etc.) with the present physical plant, facilities etc., how many additional reservists could be assigned to your Command/Center?

THE CENTER HAS THE CAPACITY TO DOUBLE THE NUMBER TO 500 OF DRILLING RESERVISTS BY CHANGING THE NUMBER OF DRILL WEEKENDS FROM ONE TO TWO, AND TRIPLING THE NUMBER TO 750 OF DRILLING RESERVISTS BY INCREASING TO THREE DRILL WEEKENDS PER MONTH.

2. Describe any investment you see that could significantly increase your capacity to accomplish the Authorized/Directed Drill Utilization missions; include costs, and indicate what additional capacity, in terms of utilization hours per drill period and utilization days per fiscal year.

BUILDING #2, THE ABANDONED USMCR BUILDING LOCATED AT THE REAR OF THE FACILITY GROUNDS, CURRENTLY INADEQUATE, COULD BE RENOVATED FOR APPROXIMATELY 250 - 500 K. IF REFURBISHED, IT COULD POTENTIALLY PROVIDE AN ADDITIONAL 4080 SQ FT OF ADMINISTRATIVE SPACE, AND 4177 SQ FT OF TRAINING SPACE. IF IT WAS BROUGHT BACK ON LINE AN ADDITIONAL 150 DRILLING RESERVISTS (ONE DRILL WEEKEND/MONTH) TO 300 DRILLING RESERVISTS (TWO DRILL WEEKENDS/MONTH) COULD BE ACCOMODATED.

3. List and explain the limiting factors that further funding for personnel, equipment, MILCON, etc. cannot overcome (e.g., environmental restrictions, land areas, scheduling conflicts).

NONE

I certify that the information contained herein is accurate and complete to the best of my knowledge and belief.

DEPUTY CHIEF OF NAVAL OPERATIONS (LOGISTICS)
DEPUTY CHIEF OF STAFF (INSTALLATIONS & LOGISTICS)

NAME (Please type or print)

Signature

Title

Date



Data Call 48

Activity: *NRC JACKSON, MS*

I certify that the information contained herein is accurate and complete to the best of my knowledge and belief.

DEPUTY CHIEF OF NAVAL OPERATIONS (LOGISTICS)
DEPUTY CHIEF OF STAFF (INSTALLATIONS & LOGISTICS)

J. B. GREENE, JR.

Name

ACTING

Title

J. B. Greene, Jr.

Signature

14 JUL 1994

Date

I certify that the information contained herein is accurate and complete to the best of my knowledge and belief.

NEXT ECHELON LEVEL (if applicable)

F. E. CURRAN, CAPT, USNR
NAME (Please type or print)

F. E. Curran
Signature

COMMANDER - ACTING
Title

22 JUN 94
Date

NAVRESREDCOM REG TEN, NEW ORLEANS
Activity

I certify that the information contained herein is accurate and complete to the best of my knowledge and belief.

NEXT ECHELON LEVEL (if applicable)

J. W. FITZGERALD, CAPT, USNR
NAME (Please type or print)

J. W. Fitzgerald
Signature

COMMANDER - ACTING
Title

29 JUN 1994
Date

COMNAVSURFRESFOR
Activity

I certify that the information contained herein is accurate and complete to the best of my knowledge and belief.

MAJOR CLAIMANT LEVEL

T. F. HALL, RADM, USN
NAME (Please type or print)

TF Hall
Signature

COMMANDER
Title

7/5/94
Date

COMNAVRESFOR
Activity



BRAC-95 CERTIFICATION

Reference: SECNAVNOTE 11000 of 08 December 1993

In accordance with policy set forth by the Secretary of the Navy, personnel of the Department of the Navy, uniformed and civilian, who provide information for use in the BRAC-95 process are required to provide a signed certification that states "I certify that the information contained herein is accurate and complete to the best of my knowledge and belief." The signing of this certification constitutes a representation that the certifying official has reviewed the information and either (1) personally vouches for its accuracy and completeness or (2) has possession of, and is relying upon, a certification executed by a competent subordinate.

Each individual in your activity generating information for the BRAC-95 process must certify that information. Enclosure (1) is provided for individual certifications and may be duplicated as necessary. You are directed to maintain those certifications at your activity for audit purposes. For purposes of this certification sheet, the commander of the activity will begin the certification process and each reporting senior in the Chain of Command reviewing the information will also sign this certification sheet. This sheet must remain attached to this package and be forwarded up the Chain of Command. Copies must be retained by each level in the Chain of Command for audit purposes.

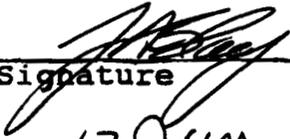
I certify that the information contained herein is accurate and complete to the best of my knowledge and belief.

ACTIVITY COMMANDER

J. A. SLAY, LCDR, USNR
NAME (Please type or print)

COMMANDING OFFICER
Title

NAVRESCEN, JACKSON, MS
Activity


Signature
17 Jun 94
Date



Dts Call 4B

BRAC-95 CERTIFICATION

UIC: 61955

Reference: SECNAVNOTE 11000 of 08 December 1993

In accordance with policy set forth by the Secretary of the Navy, personnel of the Department of the Navy, uniformed and civilian, who provide information for use in the BRAC-95 process are required to provide a signed certification that states "I certify that the information contained herein is accurate and complete to the best of my knowledge and belief." The signing of this certification constitutes a representation that the certifying official has reviewed the information and either (1) personally vouches for its accuracy and completeness or (2) has possession of, and is relying upon, a certification executed by a competent subordinate.

Each individual in your activity generating information for the BRAC-95 process must certify that information. Enclosure (1) is provided for individual certifications and may be duplicated as necessary. You are directed to maintain those certifications at your activity for audit purposes. For purposes of this certification sheet, the commander of the activity will begin the certification process and each reporting senior in the Chain of Command reviewing the information will also sign this certification sheet. This sheet must remain attached to this package and be forwarded up the Chain of Command. Copies must be retained by each level in the Chain of Command for audit purposes.

I certify that the information contained herein is accurate and complete to the best of my knowledge and belief.

ACTIVITY COMMANDER

J. A. SLAY, LCDR, USNR
NAME (Please type or print)

J. A. Slay
Signature

COMMANDING OFFICER
Title

8-2-94
Date

NAVRESCEN, JACKSON, MS
Activity

ORIGINAL



Dts Call 48

NAVRESCOM
JACKSON, MS.

UIC: 61955

I certify that the information contained herein is accurate and complete to the best of my knowledge and belief.

NEXT ECHELON LEVEL (if applicable)

F. E. CURRAN
NAME (Please type or print)

F. E. Curran
Signature

ACTING COMMANDER
Title

9 AUG 94
Date

NAVRESREDCOM REG TEN
Activity

I certify that the information contained herein is accurate and complete to the best of my knowledge and belief.

NEXT ECHELON LEVEL (if applicable)

J. W. FITZGERALD, CAPT, USNR
COMMANDER-ACTING
COMNAVSURFRESFOR

J. W. Fitzgerald
Signature
22 AUG 1994
Date

Activity

I certify that the information contained herein is accurate and complete to the best of my knowledge and belief.

MAJOR CLAIMANT LEVEL

NAME (Please type or print)

T. F. Hall
Signature T. F. HALL
13 SEP 1994
Date

Commander, Naval Reserve Forces
Title 4400 Dauphine St.
New Orleans, LA 70146

Chief of Naval Operations (N095)
2000 Navy Pentagon
Washington, DC 20350-2000

Activity

I certify that the information contained herein is accurate and complete to the best of my knowledge and belief.

DEPUTY CHIEF OF NAVAL OPERATIONS (LOGISTICS)
DEPUTY CHIEF OF STAFF (INSTALLATIONS & LOGISTICS)

NAME (Please type or print)

Signature

Title

Date

ORIGINAL

Document Separator

680

DATA CALL 1: GENERAL INSTALLATION INFORMATION

1. ACTIVITY:

* Name

Official name NAVAL RESERVE CENTER JACKSON, MS

Acronym(s) used in correspondence NAVRESCEN JACKSON

Commonly accepted short titles NAVRESCEN JACKSON

* COMPLETE MAILING ADDRESS:

181 S. JEFFERSON ST. JACKSON, MS 39201-2891

* PLAD: NAVRESCEN JACKSON

* PRIMARY UID: 61955

* ALL OTHER UID(s): N/A

2. PLANT ACCOUNT HOLDER: No

3. ACTIVITY TYPE: Independent Command

4. SPECIAL AREAS: N/A

5. DETACHMENTS: N/A

6. BRAC IMPACT: Center re-aligned to NAVRESREDCOMRES TEN effective 01 Feb 94.

Data Calls 1: General Installation Information, continued

7. MISSION:

Current Missions

* TRAIN AND ADMINISTRATIVELY SUPPORT EIGHT SELECTED RESERVE UNITS WITH AN AVERAGE TOTAL POPULATION OF 265 PERSONNEL. WITH CURRENT UNITS ASSIGNED THERE ARE NO "UNIT SPECIFIC" FUNCTIONS CARRIED OUT IN EXCESS OF STANDARD MISSION. NO MISSION CHANGES ARE CURRENTLY PLANNED OR PROJECTED.

Projected Missions for FY 2001

* NO CHANGES AS OF FY-94.

*By
LJW
2 FEB 94*

THE EXPECTED NUMBER OF SELRES WILL INCREASE DUE TO PLANNED UNIT RELOCATION RESULTING FROM ANTICIPATE SURFACE ACTIVITY CLOSURES.

8. UNIQUE MISSIONS: N/A

9. IMMEDIATE SUPERIOR IN COMMAND (ISIC):

* Operational name	UIC
<u>COMNAVRESREDCOMREG TEN</u>	<u>68307 (EFFECTIVE 01FEB94)</u>
* Funding Source	UIC
<u>COMNAVRESREDCOMREG TEN</u>	<u>68307</u>

10. PERSONNEL NUMBERS:

On Board Count as of 01 January 1994

	Officers	Enlisted	Civilian (Appropriated)
*Reporting Command	1	9	0
*Tenants (total)	N/A	N/A	N/A
*SELRES	28	72	0

Authorized Positions as of 30 September 1994

	Officers	Enlisted	Civilian (Appropriated)
*Reporting Command	1	9	0
*Tenants (total)	N/A	N/A	N/A
*SELRES	35	216	0

Activity: 61955

Data Calls 1: General Installation Information, continued

11. KEY POINTS OF CONTACT (POC):

<u>Title/Name</u>	<u>Office</u>	<u>Fax</u>	<u>Home</u>
* CO/OIC			
<u>LCDR ROSS A. MAGGARD</u>	<u>(601)352-3912</u>	<u>948-5623</u>	<u>825-9546</u>
<u>LCDR JOHN A. SLAY</u>	<u>EFFECTIVE 26FEB94</u>		

* Duty Officer

<u>BMC LARRY A. VETTER</u>	<u>(601)352-3912</u>	<u>942-5623</u>	<u>372-3206</u>
----------------------------	----------------------	-----------------	-----------------

12. TENANT ACTIVITY LIST: N/A

13. REGIONAL SUPPORT: N/A

14. FACILITY MAPS: Enclosed.

BRAC-95 CERTIFICATION

Reference: SECNAVNOTE 11000 of 08 December 1993

In accordance with policy set forth by the Secretary of the Navy, personnel of the Department of the Navy, uniformed and civilian, who provide information for use in the BRAC-95 process are required to provide a signed certification that states "I certify that the information contained herein is accurate and complete to the best of my knowledge and belief." The signing of this certification constitutes a representation that the certifying official has reviewed the information and either (1) personally vouches for its accuracy and completeness or (2) has possession of, and is relying upon, a certification executed by a competent subordinate.

Each individual in your activity generating information for the BRAC-95 process must certify that information. Enclosure (1) is provided for individual certifications and may be duplicated as necessary. You are directed to maintain those certifications at your activity for audit purposes. For purposes of this certification sheet, the commander of the activity will begin the certification process and each reporting senior in the Chain of Command reviewing the information will also sign this certification sheet. This sheet must remain attached to this package and be forwarded up the Chain of Command. Copies must be retained by each level in the Chain of Command for audit purposes.

I certify that the information contained herein is accurate and complete to the best of my knowledge and belief.

ACTIVITY COMMANDER

R. A. MAGGARD
NAME (Please type or print)

R. A. Maggard
Signature

COMMANDING OFFICER
Title

22 Jan 94
Date

NAVRESCEN, JACKSON, MS.
Activity

Activity 61955

I certify that the information contained herein is accurate and complete to the best of my knowledge and belief.

NEXT ECHELON LEVEL (if applicable)

W. F. THRELKELD, CAPT
NAME (Please type or print)

W. F. Threlkeld
Signature

DEPUTY COMMANDER, ACTING
Title

AMC
CNSRF
331
2 FEB 94

31 Jan 94
Date

NAVRESREDCOMREG NINE
Activity

I certify that the information contained herein is accurate and complete to the best of my knowledge and belief.

NEXT ECHELON LEVEL (if applicable)

J. W. FITZGERALD
ADM F. W. HARNESS
NAME (Please type or print)

AMC CNSRF 331
3 FEB 94

J. W. Fitzgerald
Signature

Commander- Acting
Title

3 Feb 94
Date

COMNAVSURFRESFOR
Activity

I certify that the information contained herein is accurate and complete to the best of my knowledge and belief.

MAJOR CLAIMANT LEVEL

T. F. HALL
NAME (Please type or print)

T. F. Hall
Signature

Commander, Naval Reserve Force
4488 Dauphine St.
Title New Orleans, LA 70146

2/10/94
Date

Activity

NRC JACKSON, MS

Activity 61955

I certify that the information contained herein is accurate and complete to the best of my knowledge and belief.

DEPUTY CHIEF OF NAVAL OPERATIONS (LOGISTICS
DEPUTY CHIEF OF STAFF (INSTALLATIONS & LOGISTICS)

R. R. Sareeram

NAME (Please type or print)

Acting

Title


Signature

15 Feb 1954
Date

Document Separator

DATA CALL 63

FAMILY HOUSING DATA

680

Information on Family Housing is required for use in BRAC-95 return on investment calculations.

Installation Name:	NRC Jackson
Unit Identification Code (UIC):	N61955
Major Claimant:	COMNAVRESFOR

Percentage Of Military Families Living on-Base:	0
Number of Vacant Officer Housing Units:	0
Number of Vacant Enlisted Housing Units:	0
Fy 1996 Family Housing Budget (\$000):	0
Total Number of Officer Housing Units:	0
Total Number of Enlisted Housing Units:	0

No housing or budget data associated with this UIC available.

Note: All data should reflect figures as of the beginning of FY 1996. If major DON installations share a family housing complex, figures should reflect an estimate of the installation's prorated share of the family housing complex.

I certify that the information contained herein is accurate and complete to the best of my knowledge and belief.

MAJOR CLAIMANT LEVEL

J. E. BUFFINGTON, RADM, CEC, USN
NAME (Please type or print)

COMMANDER
Title

NAVAL FACILITIES ENGINEERING COMMAND
Activity



Signature
7/20/94

Date

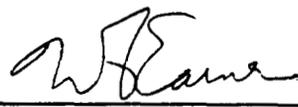
I certify that the information contained herein is accurate and complete to the best of my knowledge and belief.

DEPUTY CHIEF OF NAVAL OPERATIONS (LOGISTICS)
DEPUTY CHIEF OF STAFF (INSTALLATIONS & LOGISTICS)

W. A. EARNER

NAME (Please type or print)

Title



Signature
7/25/94

Date

BRAC-95 CERTIFICATION

Reference: SECNAV NOTE 11000 dtd 8 Dec 93

In accordance with policy set forth by the Secretary of the Navy, personnel of the Department of the Navy, uniformed and civilian, who provide information for use in the BRAC-95 process are required to provide a signed certification that states "I certify that the information contained herein is accurate and complete to the best of my knowledge and belief."

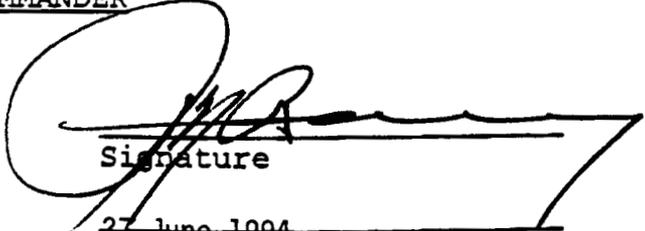
The signing of this certification constitutes a representation that the certifying official has reviewed the information and either (1) personally vouches for its accuracy and completeness or (2) has possession of, and is relying upon, a certification executed by a competent subordinate.

Each individual in your activity generating information for the BRAC-95 process must certify that information. Enclosure (1) is provided for individual certifications and may be duplicated as necessary. You are directed to maintain those certifications at your activity for audit purposes. For purposes of this certification sheet, the commander of the activity will begin the certification process and each reporting senior in the Chain of Command reviewing the information will also sign this certification sheet. This sheet must remain attached to this package and be forwarded up the Chain of Command. Copies must be retained by each level in the Chain of Command for audit purposes.

I certify the information contained herein is accurate and complete to the best of my knowledge and belief.

ACTIVITY COMMANDER

J. R. REVER
NAME (Please type of print)
CAPT. CEC, USN
COMMANDING OFFICER
Title


Signature
27 June 1994
Date

SOUTHNAVFACENGCOM
Activity

Enclosure (1)

Document Separator

ORIGINAL

ENVIRONMENTAL DATA CALL

Responses to the following questions provide data that will allow an assessment of the potential environmental impact associated with the closure or realignment of a Navy shore activity. This criterion consists of:

- Endangered/Threatened Species and Biological Habitat
- Wetlands
- Cultural Resources
- Environmental Facilities
- Air Pollution
- Environmental Compliance
- Installation Restoration
- Land/Air/Water Use

As part of the answers to these questions, a *source citation* (e.g., 1993 base loading, 1993 base-wide Endangered Species Survey, 1993 letter from USFWS, 1993 Base Master Plan, 1993 Permit Application, 1993 PA/SI, etc.) must be included. It is probable that, at some point in the future, you will be asked to provide additional information detailing specifics of individual characteristics. In anticipation of this request, supporting documentation (e.g., maps, reports, letters, etc.) regarding answers to these questions should be retained. Information needed to answer these questions is available from the cognizant EFD Planning and Real Estate Divisions, and Environment, Safety, and Health Divisions; and from the activity Public Works Department, and activity Health Monitoring and Safety Offices.

For purposes of the questions associated with land use at your base is *defined as land* (acreage owned, withdrawn, leased, and controlled through easements); *air* (space controlled through agreements with the FAA, e.g., MOAs); *and water* (navigation channels and waters along a base shoreline) *under the control of the Navy*.

Provide a list of the tenant activities with UICs that are covered in this response.

N/A

1. ENDANGERED/THREATENED SPECIES AND BIOLOGICAL HABITAT

1a. For federal or state listed endangered, threatened, or category 1 plant and/or animal species on your base, complete the following table. Critical/sensitive habitats for these species are designated by the U. S. Fish and Wildlife Service (USFWS). A species is present on your base if some part of its life-cycle occurs on Navy controlled property (e.g., nesting, feeding, loafing). Important Habitat refers to that number of acres of habitat that is important to some life cycle stage of the threatened/endangered species that is not formally designated.

SPECIES (plant or animal)	Designation (Threatened/ Endangered)	Federal/ State	Critical / Designated Habitat (Acres)	Important Habitat (acres)
<i>example: Haliaeetus leucocephalus - bald eagle</i>	<i>threatened</i>	<i>Federal</i>	<i>25</i>	<i>0</i>
<i>N/A</i>				

Source Citation: *N/A*

1b.

Have your base operations or development plans been constrained due to: - USFWS or National Marine Fisheries Service (NMFS)? - State required modifications or constraints? If so, identify below the impact of the constraints including any restrictions on land use.	YES <input type="radio"/> NO <input checked="" type="radio"/>
Are there any requirements resulting from species not residing on base, but which migrate or are present nearby? If so, summarize the impact of such constraints.	YES <input type="radio"/> NO <input checked="" type="radio"/>



1c. If the area of the habitat and the associated species have not been identified on base maps provided in Data Call 1, submit this information on an updated version of Data Call 1 map.

1d.

Have any efforts been made to relocate any species and/or conduct any mitigation with regards to critical habitats or endangered/threatened species? Explain what has been done and why.	YES/NO
--	--------

1e.

Will any state or local laws and/or regulations applying to endangered/threatened species which have been enacted or promulgated but not yet effected, constrain base operations or development plans beyond those already identified? Explain.	YES/NO
---	--------



2. WETLANDS

Note: Jurisdictional wetlands are those areas that meet the wetland definitional criteria detailed in the Corps of Engineers (COE) Wetland Delineation Manual, 1987, Technical Report Y-87-1, U.S. Army Engineer Waterway Experiment Station, Vicksburg, MS or officially adapted state definitions.

2a.

Does your base possess federal jurisdictional wetlands?	YES <input type="radio"/> NO <input checked="" type="radio"/>
Has a wetlands survey in accordance with established standards been conducted for your base?	YES <input type="radio"/> NO <input checked="" type="radio"/>
When was the survey conducted or when will it be conducted? ___/___/___	N/A
What percent of the base has been surveyed?	N/A
What is the total acreage of jurisdictional wetlands present on your base?	N/A

Source Citation: N/A

2b. If the area of the wetlands has not been identified on base maps provided in Data Call 1, submit this on an updated version of Data Call 1 map.

2c. Has the EPA, COE or a state wetland regulatory agency required you to modify or constrain base operations or development plans in any way in order to accommodate a jurisdictional wetland? NO If YES, summarize the results of such modifications or constraints.

3. CULTURAL RESOURCES

3a.

Has a survey been conducted to determine historic sites, structures, districts or archaeological resources which are listed, or determined eligible for listing, on the National Register of Historic Places? If so, list the sites below.	YES <input type="radio"/> NO <input checked="" type="radio"/>
--	---



3b.

YES/NO

<p>Has the President's Advisory Council on Historic Preservation or the cognizant State Historic Preservation Officer required you to mitigate or constrain base operations or development plans in any way in order to accommodate a National Register cultural resource? If YES, list the results of such modifications or constraints below.</p>	<p>YES/NO</p>
---	---------------

3c.

<p>Are there any on base areas identified as sacred areas or burial sites by Native Americans or others? List below.</p>	<p>YES/NO</p>
--	---------------

4. ENVIRONMENTAL FACILITIES

Notes: If your facility is permitted for less than maximum capacity, state the maximum capacity and explain below the associated table why it is not permitted for maximum capacity. Under "Permit Status" state when the permit expires, and whether the facility is operating under a waiver. For permit violations, limit the list to the last 5 years.

4a.

Does your base have an operating landfill?					YES	NO
ID/Location of Landfill	Permitted Capacity (CYD)		Maximum Capacity (CYD)	Contents ¹	Permit Status	
	TOTAL	Remaining				
N/A						

¹ Contents (e.g. building demolition, asbestos, sanitary debris, etc)

Are there any current or programmed projects to correct deficiencies or improve the facility.



4b. If there are any non-Navy users of the landfill, describe the user and conditions/agreements.

4c.

Does your base have any disposal, recycling, or incineration facilities for solid waste?					YES / NO
Facility/Type of Operation	Permitted Capacity	Ave Daily Throughput	Maximum Capacity	Permit Status	Comments
N/A					

List any permit violations and projects to correct deficiencies or improve the facility.

4d.

Does your base own/operate a Domestic Wastewater Treatment Plant (WWTP) ?					YES (NO)
ID/Location of WWTP	Permitted Capacity	Ave Daily Discharge Rate	Maximum Capacity	Permit Status	Level of Treatment/Year Built
N/A					

List permit violations and discuss any projects to correct deficiencies.

4e. If you do not have a domestic WWTP, describe the average discharge rate of your base to the local sanitary sewer authority, discharge limits set by the sanitary sewer authority (flow and pollutants) and whether the base is in compliance with their permit. Discuss recurring discharge violations.

AVERAGE DISCHARGE 1200 CUBIC FEET PER MONTH, NO LIMITS FOR DISCHARGE BECAUSE CLASSIFIED AS NON-COMMERCIAL / INDUSTRIAL PLANT. NO PERMIT REQUIRED (PERMITS REQUIRED FOR DISCHARGES OF 25,000 GALLON PER DAY OR GREATER).



4f.

Does your base operate an Industrial Waste Treatment Plant (IWTP)?					YES <input type="radio"/> NO <input checked="" type="radio"/>
ID/Location of IWTP	Type of Treatment	Permitted Capacity	Ave Daily Discharge Rate	Maximum Capacity	Permit Status

List any permit violations and projects to correct deficiencies or improve the facility.

4g. Are there other waste treatment flows not accounted for in the previous tables? Estimate capacity and describe the system. *NO*

4h.

Does your base operate drinking Water Treatment Plants (WTP)?				YES <input type="radio"/> NO <input checked="" type="radio"/>	
ID/Location of WTP	Operating (GPD)		Method of Treatment	Maximum Capacity	Permit Status
	Permitted Capacity	Daily Rate			

List permit violations and projects/actions to correct deficiencies or improve the facility.

4i. If you do not operate a WTP, what is the source of the base potable water supply. State terms and limits on capacity in the agreement/contract, if applicable.

*SOURCE: WATER/SEWER ADMINISTRATION, JACKSON, MS.
NO LIMITATIONS.*



4j.

Does the presence of contaminants or lack of supply of water constrain base operations. Explain.	YES <input type="radio"/> NO <input checked="" type="radio"/>
--	---

4k.

Other than those described above does your base hold any NPDES or stormwater permits? If YES, describe permit conditions.	YES <input type="radio"/> NO <input checked="" type="radio"/>
If NO, why not and provide explanation of plan to achieve permitted status.	NOT REQUIRED, HAVE NO VEHICLE MAINTENANCE FACILITIES

4l.

	YES <input type="radio"/> NO <input checked="" type="radio"/>
Does your base have bilge water discharge problem?	NO
Do you have a bilge water treatment facility?	NO

Explain:

4m.

Will any state or local laws and/or regulations applying to Environmental Facilities, which have been enacted or promulgated but not yet effected, constrain base operations or development plans beyond those already identified? Explain.	YES <input type="radio"/> NO <input checked="" type="radio"/>
---	---

4n. What expansion capacity is possible with these Environmental Facilities? Will any expansions/upgrades as a result of BRACON or projects programmed through the Presidents budget through FY 1997 result in additional capacity? Explain.

N/A

4o. Do capacity limitations on any of the facilities discussed in question 4 pose a present or future limitation on base operations? Explain.

N/A



5. AIR POLLUTION

5a.

What is the name of the Air Quality Control Areas (AQCA) in which the base is located?
HEADS MOBILE - PENSACOLA - PANAMA CITY - SOUTHERN

Is the installation or any of its OLFs or non-contiguous base properties located in different AQCA's? NO. List site, location and name of AQCA.

MS
 INTERSTATE
 AQCA
 CNRF
 OIEL
 6/4/94

5b. For each parcel in a separate AQCA fill in the following table. Identify with and "X" whether the status of each regulated pollutant is: attainment/nonattainment/maintenance. For those areas which are in non-attainment, state whether they are: Marginal, Moderate, Serious, Severe, or Extreme. State target attainment year.

MOBILE - PENSACOLA - PANAMA CITY
 SOUTHERN MS. INTERSTATE AQCA

Site: NRC JACKSON, MS.

AQCA: HEADS COUNTY

Pollutant	Attainment	Non-Attainment	Maintenance	Target Attainment Year ¹	Comments ²
CO	X				UNCLASSIFIABLE ATTAINMENT (U/A)
Ozone	X				U/A
PM-10					BETTER THAN NATIONAL STANDARDS
SO ₂					BETTER THAN NATIONAL STANDARDS
NO ₂					CANNOT BE CLASSIFIED OR BETTER THAN NATIONAL STANDARDS
Pb					

MS
 CNRF
 OIEL
 6/4/94

¹ Based on national standard for Non-Attainment areas or SIP for Maintenance areas.

² Indicate if attainment is dependent upon BRACON, MILCON or Special Projects. Also indicate if the project is currently programmed within the Presidents FY1997 budget.



5c. For your base, identify the baseline level of emissions, established in accordance with the Clean Air Act. Baseline information is assumed to be 1990 data or other year as specified. Determine the total level of emissions (tons/yr) for CO, NOx, VOC, PM10 for the general sources listed. For all data provide a list of the sources and show your calculations. Use known emissions data, or emissions derived from use of state methodologies, or identify other sources used. "Other Mobile" sources include such items as ground support equipment.

Emission Sources (Tons/Year)					
Pollutant	Permitted Stationary	Personal Automobiles	Aircraft Emissions	Other Mobile	Total
CO	N/A				
NOx					
VOC					
PM10					

Source Document: N/A

5d. For your base, determine the total FY1993 level of emissions (tons/yr) for CO, NOx, VOC, PM10 for the general sources listed. For all data provide a list of the sources and show your calculations. Use known emissions data, or emissions derived from use of state methodologies, or identify other sources used. "Other Mobile" sources include such items as ground support equipment.

Emissions Sources (Tons/Year)					
Pollutant	Permitted Stationary	Personal Automobiles	Aircraft Emissions	Other Mobile	Total
CO	N/A				
NOx					
VOC					
PM10					

Source Document: N/A



5e. Provide estimated increases/decreases in air emissions (Tons/Year of CO, NOx, VOC, PM10) expected within the next six years (1995-2001). Either from previous BRAC realignments and/or previously planned downsizing shown in the Presidents FY1997 budget. Explain.

N/A

5f. Are there any critical air quality regions (i.e. non-attainment areas, national parks, etc.) within 100 miles of the base?

~~NO~~

BIENVILLE NF
DELTA NF
HOMOCHITTO NF
TOMBIGBEE NF



CNLF 01E2
6/4/94

5g. Have any base operations/mission/functions (i.e.: training, R&D, ship movement, aircraft movement, military operations, support functions, vehicle trips per day, etc.) been restricted or delayed due to air quality considerations. Explain the reason for the restriction and the "fix" implemented or planned to correct.

No.

5h. Does your base have Emission Reduction Credits (ERCs) or is it subject to any emission offset requirements? If yes, provide details of the sources affected and conditions of the ERCs and offsets. Is there any potential for getting ERCs?

No.



6. ENVIRONMENTAL COMPLIANCE

6a. Identify compliance costs, currently known or estimated that are required for permits or other actions required to bring existing practices into compliance with appropriate regulations. Do not include Installation Restoration costs that are covered in Section 7 or recurring costs included in question 6c. For the last two columns provide the two year totals for those FY's.

Program	Survey Completed?	Costs in \$K to correct deficiencies					
		FY1994	FY1995	FY1996	FY1997	FY98-99	FY00-01
Air	N/A						
Hazardous Waste	N/A						
Safe Drinking Water Act	YES	Ø	Ø	Ø	Ø	Ø	Ø
PCBs	N/A						
Other (non-PCB) Toxic Substance Control Act	N/A						
Lead Based Paint	YES	Ø	41.7	Ø	Ø	Ø	Ø
Radon	YES	Ø	Ø	Ø	Ø	Ø	Ø
Clean Water Act	N/A						
Solid Waste	N/A						
Oil Pollution Act	N/A						
USTs	N/A						
Other <i>PISTOL RANGE DELEADING</i>	NO	Ø	5Ø	Ø	Ø	Ø	Ø
Total			91.7				

Provide a separate list of compliance projects in progress or required, with associated cost and estimated start/completion date.

6b. Does your base have structures containing asbestos? YES What % of your base has been surveyed for asbestos? 100% Are additional surveys planned? NO What is the estimated cost to remediate asbestos (\$K) 29.8 Are asbestos survey costs based on encapsulation, removal or a combination of both? REMOVAL.

OPTIONAL FORM 99 (7-90)

FAX TRANSMITTAL

of pages **2**

To <u>CDR CLARK</u>	From <u>ICDA SLAY/NARC JAX</u>
Dept./Agency <u>OPRF (CODE 331)</u>	Phone <u>(601) 352-3912</u>
Fax # <u>(504) 942-6077</u>	Fax # <u>(601) 948-5623</u>

6c. Provide detailed cost of recurring operational (environmental) compliance costs, with funding source.

Funding Source	FY1992	FY1993	FY1994	FY1995	FY1996	FY1997	FY98-99	FY00-01
O&MN								
HA	N/A							
PA	N/A							
Other O&MN (specify)	N/A							
Other (specify)	N/A							
TOTAL:	N/A							

6d. Are there any compliance issues/requirements that have impacted operations and/or development plans at your base.

7. INSTALLATION RESTORATION

7a.

Does your base have any sites that are contaminated with hazardous substances or petroleum products?	YES/NO
Is your base an NPL site or proposed NPL site?	NO

7b. Provide the following information about your Installation Restoration (IR) program. Project list may be provided in separate table format. Note: List only projects eligible for funding under the Defense Environmental Restoration Account (DERA). Do not include UST compliance projects properly listed in section VI.

Site # or name	Type site ¹	Groundwater Contaminated?	Extends off base?	Drinking Water Source?	Cost to Complete (\$M)/Est. Compl. Date	Status ² /Comments
N/A						

¹ Type site: CERCLA, RCRA corrective action (CA), UST or other (explain)

² Status = PA, SI, RI, RD, RA, long term monitoring, etc.

7c. Have any contamination sites been identified for which there is no recognized/accepted remediation process available? List.

NO.

7d.

Is there a groundwater treatment system in place?	YES <input type="radio"/> NO <input checked="" type="radio"/>
Is there a groundwater treatment system planned?	YES <input type="radio"/> NO <input checked="" type="radio"/>

State scope and expected length of pump and treat operation.

N/A

7e.

Has a RCRA Facilities Assessment been performed for your base?	YES <input type="radio"/> NO <input checked="" type="radio"/>
--	---

7f. Does your base operate any "Conforming Storage" facilities for handling hazardous materials? If YES, describe facility, capacity, restrictions, and permit conditions.

NO

7g. Does your base operate any "Conforming Storage" facilities for handling hazardous waste? If YES, describe facility, capacity, restrictions, and permit conditions.

NO.

7h. Is your base responsible for any non-appropriated fund facilities (exchange, gas station) that require cleanup? If so, describe facility/location and cleanup required/status.

NO.

7i.

Do the results of any radiological surveys conducted indicate limitations on future land use? Explain below.	<i>NO</i>
--	-----------



7j. Have any base operations or development plans been restricted due to Installation Restoration considerations? **NO**

7k. List any other hazardous waste treatment or disposal facilities not included in question 7b. above. Include capacity, restrictions and permit conditions. **NONE**

8. LAND / AIR / WATER USE

8a. List the acreage of each real estate component controlled or managed by your base (e.g., Main Base - 1,200 acres, Outlying Field - 200 acres, Remote Range - 1,000 acres, remote antenna site - 5 acres, Off-Base Housing Area - 25 acres).

Parcel Descriptor	Acres	Location
NRL JACKSON	1.7	JACKSON, MS

8b. Provide the acreage of the land use categories listed in the table below:

LAND USE CATEGORY		ACRES
Total Developed: (administration, operational, housing, recreational, training, etc.)		1.4
Total Undeveloped (areas that are left in their natural state but are under specific environmental development constraints, i.e.: wetlands, endangered species, etc.)	Wetlands:	∅
	All Others:	∅
Total Undeveloped land considered to be without development constraints, but which may have operational/man caused constraints (i.e.: HERO, HERF, HERP, ESQD, AICUZ, etc.) TOTAL		∅
Total Undeveloped land considered to be without development constraints		.3
Total Off-base lands held for easements/lease for specific purposes		∅
Breakout of undeveloped, restricted areas. Some restricted areas may overlap:	ESQD	∅
	HERF	∅
	HERP	∅
	HERO	∅
	AICUZ	∅
	Airfield Safety Criteria	∅
	Other	∅

8c. How many acres on your base (includes off base sites) are dedicated for training purposes (e.g., vehicular, earth moving, mobilization)? This does not include buildings or interior small arms ranges used for training purposes. NONE.

8d. What is the date of your last AICUZ update? N/A / ____ Are any waivers of airfield safety criteria in effect on your base? Y/N Summarize the conditions of the waivers below.



8e. List the off-base land use *types* (e.g. residential, industrial, agricultural) and *acreage* within Noise Zones 2 & 3 generated by your flight operations and whether it is compatible/incompatible with AICUZ guidelines on land use.

Acreage/Location/ID	Zones 2 or 3	Land Use	Compatible/ Incompatible
N/A			

8f. List the navigational channels and berthing areas controlled by your base which require maintenance dredging? Include the frequency, volume, current project depth, and costs of the maintenance requirement.

Navigational Channels/ Berthing Areas	Location / Description	Maintenance Dredging Requirement			
		Frequency	Volume (MCY)	Current Project Depth (FT)	Cost (\$M)
N/A					



8g. Summarize planned projects through FY 1997 requiring new channel or berthing area dredged depths, include location, volume and depth.

NONE.

8h.

Are there available designated dredge disposal areas for maintenance dredging material? List location, remaining capacity, and future limitations.	<i>N/A</i>
Are there available designated dredge disposal areas for new dredge material? List location, remaining capacity, and future limitations.	<i>N/A</i>
Are the dredged materials considered contaminated? List known contaminants.	<i>N/A</i>

8i. List any requirements or constraints resulting from consistency with State Coastal Zone Management Plans.

NONE.

8j. Describe any non-point source pollution problems affecting water quality ,e.g.: coastal erosion.

NONE.

8k.

If the base has a cooperative agreement with the US Fish and Wildlife Service and/or the State Fish and Game Department for conducting a hunting and fishing program, does the agreement or these resources constrain either current or future operations or activities? Explain the nature and extent of restrictions.	YES/NO <i>N/A</i>
---	----------------------

8l. List any other areas on your base which are indicated as protected or preserved habitat other than threatened/endangered species that have been listed in Section 1. List the species, whether or not treated, and the acres protected/preserved.

NONE.



9. WRAPUP

9a. Are there **existing or potential environmental showstoppers** that have affected or will affect the accomplishment of the installation mission that have not been covered in the previous 8 questions?

NO.

9b. Are there any **other environmental permits** required for base operations, include any relating to industrial operations.

NO.

9c. Describe any **other environmental or encroachment restrictions** on base property not covered in the previous 8 sections.

NONE.

9d. List any **future/proposed laws/regulations** or any **proposed laws/regulations** which will constrain base operations or development plans in any way. Explain.

NONE.



BRAC-95 CERTIFICATION

Reference: SECNAV NOTE 11000 dtd 8 Dec 93

In accordance with policy set forth by the Secretary of the Navy, personnel of the Department of the Navy, uniformed and civilian, who provide information for use in the BRAC-95 process are required to provide a signed certification that states "I certify that the information contained herein is accurate and complete to the best of my knowledge and belief."

The signing of this certification constitutes a representation that the certifying official has reviewed the information and either (1) personally vouches for its accuracy and completeness or (2) has possession of, and is relying upon, a certification executed by a competent subordinate.

Each individual in your activity generating information for the BRAC-95 process must certify that information. Enclosure (1) is provided for individual certifications and may be duplicated as necessary. You are directed to maintain those certifications at your activity for audit purposes. For purposes of this certification sheet, the commander of the activity will begin the certification process and each reporting senior in the Chain of Command reviewing the information will also sign this certification sheet. This sheet must remain attached to this package and be forwarded up the Chain of Command. Copies must be retained by each level in the Chain of Command for audit purposes.

I certify the information contained herein is accurate and complete to the best of my knowledge and belief.

ACTIVITY COMMANDER

JOHN A. SLAY
NAME (Please type of print)
COMMANDING OFFICER
Title
NRC, JACKSON MS
Activity

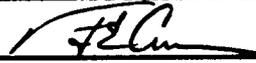
John A. Slay
Signature
12 May 1994
Date



I certify that the information contained herein is accurate and complete to the best of my knowledge and belief.

NEXT ECHELON LEVEL (if applicable)

F. E. CURRAN
NAME (Please type or print)
Acting Commander
Title
NAVRESREDCOM REG TEN
Activity


Signature
24 May 1994
Date

(CONCERNING: NAVRESCEN, Jackson, MS)

I certify that the information contained herein is accurate and complete to the best of my knowledge and belief.

NEXT ECHELON LEVEL (if applicable)

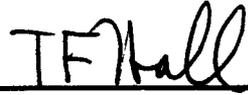
J.W. FITZGERALD, CAPT, USNR
NAME (Please type of print)
COMMANDER - ACTING
Title
COMNAVSURFRESFOR
Activity


Signature
7 JUN 1994
Date

In certify that the information herein is accurate and complete to the best of my knowledge and belief.

MAJOR CLAIMANT LEVEL

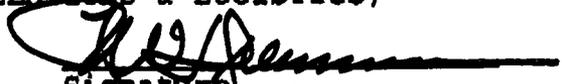
T. F. HALL
NAME (Please type or print)
Commander, Naval Reserve Force
Title
4400 Dauphine St.
New Orleans, LA 70146
Activity


Signature
6/8/94
Date

I certify that the information contained herein is accurate and complete to the best of my knowledge belief.

DEPUTY CHIEF OF NAVAL OPERATIONS (LOGISTICS)
DEPUTY CHIEF OF STAFF (INSTALLATIONS & LOGISTICS)

P. W. DRENNON
NAME (Please type of print)
ACTING
Title


Signature
6/24/94
Date

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Activity Identification: Please complete the following table, identifying the activity for which this response is being submitted.

Activity Name:	NAVRESCEN JACKSON
UIC:	N61955
Major Claimant:	COMMANDER NAVAL RESERVE FORCE

General Instructions/Background:

Information requested in this data call is required for use by the Base Structure Evaluation Committee (BSEC), in concert with information from other data calls, to analyze both the impact that potential closure or realignment actions would have on a local community and the impact that relocations of personnel would have on communities surrounding receiving activities. In addition to Cost of Base Realignment Actions (COBRA) analyses which incorporate standard Department of the Navy (DON) average cost factors, the BSEC will also be conducting more sophisticated economic and community infrastructure analyses requiring more precise, activity-specific data. For example, activity-specific salary rates are required to reflect differences in salary costs for activities with large concentrations of scientists and engineers and to address geographic differences in wage grade salary rates.

Questions relating to "Community Infrastructure" are required to assist the BSEC in evaluating the ability of a community to absorb additional employees and functions as the result of relocation from a closing or realigning DON activity.

Due to the varied nature of potential sources which could be used to respond to the questions contained in this data call, a block appears after each question, requesting the identification of the source of data used to respond to the question. To complete this block, identify the source of the data provided, including the appropriate references for source documents, names and organizational titles of individuals providing information, etc. Completion of this "Source of Data" block is critical since some of the information requested may be available from a non-DoD source such as a published document from the local chamber of commerce, school board, etc. Certification of data obtained from a non-DoD source is then limited to certifying that the information contained in the data call response is an accurate and complete representation of the information obtained from the source. Records must be retained by the certifying official to clearly document the source of any non-DoD information submitted for this data call.



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General Instructions/Background (Continued):

The following notes are provided to further define terms and methodologies used in this data call. Please ensure that responses consistently follow this guidance:

Note 1: Throughout this data call, the term "activity" is used to refer to the DON installation that is the addressee for the data call.

Note 2: Periodically throughout this data call, questions will include the statement that the response should refer to the "area defined in response to question 1.b., (page 3)". Recognizing that in some large metropolitan areas employee residences may be scattered among many counties or states, the scope of the "area defined" may be limited to the sum of:

- those counties that contain government (DoD) housing units (as identified in 1.b.2)), and,
- those counties closest to the activity which, in the aggregate, include the residences of 80% or more of the activity's employees.

Note 3: Responses to questions referring to "civilians" in this data call should reflect federal civil service appropriated fund employees.

1. Workforce Data

a. **Average Federal Civilian Salary Rate.** Provide the projected FY 1996 average gross annual appropriated fund civil service salary rate for the activity identified as the addressee in this data call. This rate should include all cash payments to employees, and exclude non-cash personnel benefits such as employer retirement contributions, payments to former employees, etc.

N/A. NO CIVILIANS EMPLOYED AT NAVRESCEN JACKSON.

Average Appropriated Fund Civilian Salary Rate:	N/A
---	-----

Source of Data (1.a. Salary Rate):	N/A
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b. **Location of Residence.** Complete the following table to identify where employees live. Data should reflect current workforce.

1) **Residency Table.** Identify residency data, by county, for both military and civilian (civil service) employees working at the installation (including, for example, operational units that are homeported or stationed at the installation). For each county listed, also provide the estimated average distance from the activity, in miles, of employee residences and the estimated average length of time to commute one-way to work. For the purposes of displaying data in the table, any county(s) in which 1% or fewer of the activity's employees reside may be consolidated as a single line entry in the table, titled "Other".

County of Residence	State	No. of Employees Residing in County		Percentage of Total Employees	Average Distance From Base (Miles)	Average Duration of Commute (Minutes)
		Military	Civilian			
RANKIN	MS	1		10	14	17
HINDS	MS	8		80	6	10
COPIAH	MS	1		10	35	40

- 100%

As discussed in Note 2 on Page 2, subsequent questions in the data call refer to the "area defined in response to question 1.b., (page 3)". In responding to these questions, the scope of the "area defined" may be limited to the sum of: a) those counties that contain government (DoD) housing units (as identified below), and, b) those counties closest to the activity which, in the aggregate, include the residences of 80% or more of the activity's employees.

2) **Location of Government (DoD) Housing.** If some employees of the base live in government housing, identify the county(s) where government housing is located:

N/A. NO FULL TIME SUPPORT (FTS) PERSONNEL LIVE IN GOVERNMENT HOUSING.

Source of Data (1.b. 1) & 2) Residence Data): CO, NAVRESCEN JACKSON, MS

c. **Nearest Metropolitan Area(s).** Identify all major metropolitan area(s) (i.e., population concentrations of 100,000 or more people) which are within 50 miles of the installation. If no major metropolitan area is within 50 miles of the base, then identify the nearest major metropolitan area(s) (100,000 or more people) and its distance(s) from the base.



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City	County	Distance from base (miles)
JACKSON	HINDS	-0-

Source of Data (1.c. Metro Areas): CO, NAVRESCEN JACKSON, MS



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d. Age of Civilian Workforce. Complete the following table, identifying the age of the activity's civil service workforce.

N/A

Age Category	Number of Employees	Percentage of Employees
16 - 19 Years		
20 - 24 Years		
25 - 34 Years		
35 - 44 Years		
45 - 54 Years		
55 - 64 Years		
65 or Older		
TOTAL		100 %

Source of Data (1.d.) Age Data):

N/A



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e. Education Level of Civilian Workforce

1) **Education Level Table.** Complete the following table, identifying the education level of the activity's civil service workforce. N/A

Last School Year Completed	Number of Employees	Percentage of Employees
8th Grade or less		
9th through 11th Grade		
12th Grade or High School Equivalency		
1-3 Years of College		
4 Years of College (Bachelors Degree)		
5 or More Years of College (Graduate Work)		
TOTAL		100 %

2) **Degrees Achieved.** Complete the following table for the activity's civil service workforce. Identify the number of employees with each of the following degrees, etc. To avoid double counting, only identify the highest degree obtained by a worker (e.g., if an employee has both a Master's Degree and a Doctorate, only include the employee under the category "Doctorate"). N/A

Degree	Number of Civilian Employees
Terminal Occupation Program - Certificate of Completion, Diploma or Equivalent (for areas such as technicians, craftsmen, artisans, skilled operators, etc.)	
Associate Degree	
Bachelor Degree	
Masters Degree	
Doctorate	

Source of Data (1.e.1) and 2) Education Level Data): N/A

f. **Civilian Employment By Industry.** Complete the following table to identify by "industry" the type of work performed by civil service employees at the activity. The intent of this table is to attempt to stratify the activity civilian workforce using the same categories of industries used to identify private sector employment. Employees should be categorized based on their primary duties. Additional information on categorization of



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private sector employment by industry can be found in the Office of Management and Budget Standard Industrial Classification (SIC) Manual. However, you do not need to obtain a copy of this publication to provide the data requested in this table.

Note the following specific guidance regarding the "Industry Type" codes in the first column of the table: Even though categories listed may not perfectly match the type of work performed by civilian employees, please attempt to assign each civilian employee to one of the "Industry Types" identified in the table. However, only use the Category 6, "Public Administration" sub-categories when none of the other categories apply. Retain supporting data used to construct this table at the activity-level, in case questions arise or additional information is required at some future time. Leave shaded areas blank. N/A

Industry	SIC Codes	No. of Civilians	% of Civilians
1. Agriculture, Forestry & Fishing	01-09		
2. Construction (includes facility maintenance and repair)	15-17		
3. Manufacturing (includes Intermediate and Depot level maintenance)	20-39		
3a. Fabricated Metal Products (include ordnance, ammo, etc.)	34		
3b. Aircraft (includes engines and missiles)	3721 et al		
3c. Ships	3731		
3d. Other Transportation (includes ground vehicles)	various		
3e. Other Manufacturing not included in 3a. through 3d.	various		
Sub-Total 3a. through 3e.	20-39		
4. Transportation/Communications/Utilities	40-49		
4a. Railroad Transportation	40		
4b. Motor Freight Transportation & Warehousing (includes supply services)	42		
4c. Water Transportation (includes organizational level maintenance)	44		
4d. Air Transportation (includes organizational level maintenance)	45		

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4e. Other Transportation Services (includes organizational level maintenance)	47		
4f. Communications	48		
4g. Utilities	49		
Sub-Total 4a. through 4g.	40-49		
5. Services	70-89		
5a. Lodging Services	70		
5b. Personal Services (includes laundry and funeral services)	72		
5c. Business Services (includes mail, security guards, pest control, photography, janitorial and ADP services)	73		
5d. Automotive Repair and Services	75		
5e. Other Misc. Repair Services	76		
5f. Motion Pictures	78		
5g. Amusement and Recreation Services	79		
5h. Health Services	80		
5i. Legal Services	81		
5j. Educational Services	82		
5k. Social Services	83		
5l. Museums	84		
5m. Engineering, Accounting, Research & Related Services (includes RDT&E, ISE, etc.)	87		
5n. Other Misc. Services	89		
Sub-Total 5a. through 5n.:	70-89		
6. Public Administration	91-97		
6a. Executive and General Government, Except Finance	91		

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6b. Justice, Public Order & Safety (includes police, firefighting and emergency management)	92		
6c. Public Finance	93		
6d. Environmental Quality and Housing Programs	95		
Sub-Total 6a. through 6d.			
TOTAL			100 %

Source of Data (1.f. Classification By Industry Data): N/A



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g. **Civilian Employment by Occupation.** Complete the following table to identify the types of "occupations" performed by civil service employees at the activity. Employees should be categorized based on their primary duties. Additional information on categorization of employment by occupation can be found in the Department of Labor Occupational Outlook Handbook. However, you do not need to obtain a copy of this publication to provide the data requested in this table.

Note the following specific guidance regarding the "Occupation Type" codes in the first column of the table: Even though categories listed may not perfectly match the type of work performed by civilian employees, please attempt to assign each civilian employee to one of the "Occupation Types" identified in the table. Refer to the descriptions immediately following this table for more information on the various occupational categories. Retain supporting data used to construct this table at the activity-level, in case questions arise or additional information is required at some future time. Leave shaded areas blank. N/A

Occupation	Number of Civilian Employees	Percent of Civilian Employees
1. Executive, Administrative and Management		
2. Professional Specialty		
2a. Engineers		
2b. Architects and Surveyors		
2c. Computer, Mathematical & Operations Research		
2d. Life Scientists		
2e. Physical Scientists		
2f. Lawyers and Judges		
2g. Social Scientists & Urban Planners		
2h. Social & Recreation Workers		
2i. Religious Workers		
2j. Teachers, Librarians & Counselors		
2k. Health Diagnosing Practitioners (Doctors)		
2l. Health Assessment & Treating (Nurses, Therapists, Pharmacists, Nutritionists, etc.)		
2m. Communications		
2n. Visual Arts		
Sub-Total 2a. through 2n.:		
3. Technicians and Related Support		

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3a. Health Technologists and Technicians		
3b. Other Technologists		
Sub-Total 3a. and 3b.:		
4. Administrative Support & Clerical		
5. Services		
5a. Protective Services (includes guards, firefighters, police)		
5b. Food Preparation & Service		
5c. Dental/Medical Assistants/Aides		
5d. Personal Service & Building & Grounds Services (includes janitorial, grounds maintenance, child care workers)		
Sub-Total 5a. through 5d.		
6. Agricultural, Forestry & Fishing		
7. Mechanics, Installers and Repairers		
8. Construction Trades		
9. Production Occupations		
10. Transportation & Material Moving		
11. Handlers, Equipment Cleaners, Helpers and Laborers (not included elsewhere)		
TOTAL		100 %

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Source of Data (1.g.) Classification By Occupation Data:

Description of Occupational Categories used in Table 1.g. The following list identifies public and private sector occupations included in each of the major occupational categories used in the table. Refer to these examples as a guide in determining where to allocate appropriated fund civil service jobs at the activity.

1. **Executive, Administrative and Management.** Accountants and auditors; administrative services managers; budget analysts; construction and building inspectors; construction contractors and managers; cost estimators; education administrators; employment interviewers; engineering, science and data processing managers; financial managers; general managers and top executives; chief executives and legislators; health services managers; hotel managers and assistants; industrial production managers; inspectors and compliance officers, except construction; management analysts and consultants; marketing, advertising and public relations managers; personnel, training and labor relations specialists and managers; property and real estate managers; purchasing agents and managers; restaurant and food service managers; underwriters; wholesale and retail buyers and merchandise managers.
2. **Professional Specialty.** Use sub-headings provided.
3. **Technicians and Related Support.** Health Technologists and Technicians sub-category - self-explanatory. Other Technologists sub-category includes aircraft pilots; air traffic controllers; broadcast technicians; computer programmers; drafters; engineering technicians; library technicians; paralegals; science technicians; numerical control tool programmers.
4. **Administrative Support & Clerical.** Adjusters, investigators and collectors; bank tellers; clerical supervisors and managers; computer and peripheral equipment operators; credit clerks and authorizers; general office clerks; information clerks; mail clerks and messengers; material recording, scheduling, dispatching and distributing; postal clerks and mail carriers; records clerks; secretaries; stenographers and court reporters; teacher aides; telephone, telegraph and teletype operators; typists, word processors and data entry keyers.
5. **Services.** Use sub-headings provided.
6. **Agricultural, Forestry & Fishing.** Self explanatory.
7. **Mechanics, Installers and Repairers.** Aircraft mechanics and engine specialists; automotive body repairers; automotive mechanics; diesel mechanics; electronic equipment repairers; elevator installers and repairers; farm equipment mechanics; general maintenance mechanics; heating, air conditioning and refrigeration technicians; home appliance and power tool repairers; industrial machinery repairers; line installers and cable splicers; millwrights; mobile heavy equipment mechanics; motorcycle, boat and small engine mechanics; musical instrument repairers and tuners; vending machine servicers and repairers.
8. **Construction Trades.** Bricklayers and stonemasons; carpenters; carpet installers; concrete masons and terrazzo workers; drywall workers and lathers; electricians; glaziers; highway maintenance; insulation workers; painters and paperhangers; plasterers; plumbers and pipefitters; roofers; sheet metal workers; structural and reinforcing ironworkers; tilesetters.
9. **Production Occupations.** Assemblers; food processing occupations; inspectors, testers and graders; metalworking and plastics-working occupations; plant and systems operators, printing occupations; textile, apparel and furnishings occupations; woodworking occupations; miscellaneous production operations.
10. **Transportation & Material Moving.** Busdrivers; material moving equipment operators; rail transportation occupations; truckdrivers; water transportation occupations.
11. **Handlers, Equipment Cleaners, Helpers and Laborers** (not included elsewhere). Entry level jobs not requiring significant training.

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h. Employment of Military Spouses. Complete the following table to provide estimated information concerning military spouses who are also employed in the area defined in response to question 1.b., above. Do not fill in shaded area.

1. Percentage of Military Employees Who Are Married:	50%
2. Percentage of Military Spouses Who Work Outside of the Home:	20%
3. Break out of Spouses' Location of Employment (Total of rows 3a. through 3d. should equal 100% and reflect the number of spouses used in the calculation of the "Percentage of Spouses Who Work Outside of the Home".	
3a. Employed "On-Base" - Appropriated Fund:	NONE
3b. Employed "On-Base" - Non-Appropriated Fund:	NONE
3c. Employed "Off-Base" - Federal Employment:	NONE
3d. Employed "Off-Base" - Other Than Federal Employment	100%

R

Source of Data (1.h.) Spouse Employment Data): CO, NAVRESCEN JACKSON, MS

R 9-1-94

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h. Employment of Military Spouses. Complete the following table to provide estimated information concerning military spouses who are also employed in the area defined in response to question 1.b., above. Do not fill in shaded area.

1. Percentage of Military Employees Who Are Married:	50%
2. Percentage of Military Spouses Who Work Outside of the Home:	20%
3. Break out of Spouses' Location of Employment (Total of rows 3a. through 3d. should equal 100% and reflect the number of spouses used in the calculation of the "Percentage of Spouses Who Work Outside of the Home".	
3a. Employed "On-Base" - Appropriated Fund:	NONE
3b. Employed "On-Base" - Non-Appropriated Fund:	NONE
3c. Employed "Off-Base" - Federal Employment:	NONE
3d. Employed "Off-Base" - Other Than Federal Employment	30% 100%

*NR
CNRF
7.13.94*

Source of Data (1.h.) Spouse Employment Data): CO, NAVRESCEN JACKSON, MS

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2. Infrastructure Data. For each element of community infrastructure identified in the two tables below, rate the community's ability to accommodate the relocation of additional functions and personnel to your activity. Please complete each of the three columns listed in the table, reflecting the impact of various levels of increase (20%, 50% and 100%) in the number of personnel working at the activity (and their associated families). In ranking each category, use one of the following three ratings:

- A - Growth can be accommodated with little or no adverse impact to existing community infrastructure and at little or no additional expense.
- B - Growth can be accommodated, but will require some investment to improve and/or expand existing community infrastructure.
- C - Growth either cannot be accommodated due to physical/environmental limitations or would require substantial investment in community infrastructure improvements.

Table 2.a., "Local Communities": This first table refers to the local community (i.e., the community in which the base is located) and its ability to meet the increased requirements of the installation.

Table 2.b., "Economic Region": This second table asks for an assessment of the infrastructure of the economic region (those counties identified in response to question 1.b., (page 3) - taken in the aggregate) and its ability to meet the needs of additional employees and their families moving into the area.

For both tables, annotate with an asterisk (*) any categories which are wholly supported on-base, i.e., are not provided by the local community. These categories should also receive an A-B-C rating. Answers for these "wholly supported on-base" categories should refer to base infrastructure rather than community infrastructure.

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a. Table A: Ability of the local community to meet the expanded needs of the base.

1) Using the A - B - C rating system described above, complete the table below.

Category	20% Increase	50% Increase	100% Increase
Off-Base Housing	A	A	A
Schools - Public	A	A	A
Schools - Private	A	A	A
Public Transportation - Roadways	A	A	A
Public Transportation - Buses/Subways	A	A	A
Public Transportation - Rail	A	A	A
Fire Protection	A	A	A
Police	A	A	A
Health Care Facilities	A	A	A
Utilities:	A	A	A
Water Supply	A	A	A
Water Distribution	A	A	A
Energy Supply	A	A	A
Energy Distribution	A	A	A
Wastewater Collection	A	A	A
Wastewater Treatment	A	A	A
Storm Water Collection	A	A	A
Solid Waste Collection and Disposal	A	A	A
Hazardous/Toxic Waste Disposal	A	A	A
Recreational Activities	A	A	A

Remember to mark with an asterisk any categories which are wholly supported on-base.

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2) For each rating of "C" identified in the table on the preceding page, attach a brief narrative explanation of the types and magnitude of improvements required and/or the nature of any barriers that preclude expansion.

N/A

Source of Data (2.a. 1) & 2) - Local Community Table): CO, NAVRESCEN JACKSON, MS

UIC: 61955



ORIGINAL

b. Table B: Ability of the region described in the response to question 1.b. (page 3) (taken in the aggregate) to meet the needs of additional employees and their families relocating into the area.

1) Using the A - B - C rating system described above, complete the table below.

Category	20% Increase	50% Increase	100% Increase
Off-Base Housing	A	A	A
Schools - Public	A	A	A
Schools - Private	A	A	A
Public Transportation - Roadways	A	A	A
Public Transportation - Buses/Subways	A	A	A
Public Transportation - Rail	A	A	A
Fire Protection	A	A	A
Police	A	A	A
Health Care Facilities	A	A	A
Utilities:	A	A	A
Water Supply	A	A	A
Water Distribution	A	A	A
Energy Supply	A	A	A
Energy Distribution	A	A	A
Wastewater Collection	A	A	A
Wastewater Treatment	A	A	A
Storm Water Collection	A	A	A
Solid Waste Collection and Disposal	A	A	A
Hazardous/Toxic Waste Disposal	A	A	A
Recreation Facilities	A	A	A

Remember to mark with an asterisk any categories which are wholly supported on-base.

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ORIGINAL

2) For each rating of "C" identified in the table on the preceding page, attach a brief narrative explanation of the types and magnitude of improvements required and/or the nature of any barriers that preclude expansion.

N/A

Source of Data (2.b. 1) & 2) - Regional Table: CO, NAVRESCEN JACKSON, MS



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3. Public Facilities Data:

a. **Off-Base Housing Availability.** For the counties identified in the response to question 1.b. (page 3), in the aggregate, estimate the current average vacancy rate for community housing. Use current data or information identified on the latest family housing market analysis. For each of the categories listed (rental units and units for sale), combine single family homes, condominiums, townhouses, mobile homes, etc., into a single rate:

Rental Units: 4,412

Units for Sale: 1,384

Source of Data (3.a. Off-Base Housing): 1990 CENSUS- "GENERAL HOUSING CHARACTERISTICS"
PROVIDED BY CITY OF JACKSON DEPARTMENT OF
PLANNING AND DEVELOPMENT

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b. Education.

1) Information is required on the current capacity and enrollment levels of school systems serving employees of the activity. Information should be keyed to the counties identified in the response to question 1.b. (page 3).

School District	County	Number of Schools			Enrollment		Pupil-to-Teacher Ratio		Does School District Serve Govt Housing Units?
		Elementary	Middle	High	Current	Max. Capacity	Current	Max. Ratio	
JACKSON PUBLIC/ CLINTON SCHOOL DISTRICTS	RANKIN	41	12	10	32,673	35,940	30:1	33:1	NO

* Answer "Yes" in this column if the school district in question enrolls students who reside in government housing.

Source of Data (3.b.1) Education Table): MISSISSIPPI STATE DEPARTMENT OF EDUCATION

2) Are there any on-base

"Section 6" Schools? If so, identify number of schools and current enrollment.

NO

Source of Data (3.b.2) On-Base Schools): N/A

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3) For the counties identified in the response to question 1.b. (page 3), in the aggregate, list the names of undergraduate and graduate colleges and universities which offer certificates, Associate, Bachelor or Graduate degrees :

JACKSON STATE UNIVERSITY, HINDS JR. COLLEGE, MISSISSIPPI COLLEGE, BELHAVEN COLLEGE, UNIVERSITY OF MISSISSIPPI MEDICAL CENTER, TOUGALOO COLLEGE, PHILLIPS JR. COLLEGE, MILSAPS COLLEGE.

Source of Data (3.b.3) Colleges): MS Board of Education

*avg N959 for
CURF 8/12/94*

4) For the counties identified in the response to question 1.b. (page 3), in the aggregate, list the names and major curriculums of vocational/technical training schools:

HINDS COMMUNITY COLLEGE, JACKSON BRANCH, SUNSET DRIVE (SEE ATTACHED)
HINDS COUNTY VOCATIONAL CENTER, RAYMOND (SEE ATTACHED)
NURSING ALLIED AND HEALTH CENTER, METHODIST HOSPITAL (SEE ATTACHED)

Source of Data (3.b.4) Vo-tech Training): HINDS COMMUNITY COLLEGE LEARNING RESOURCES DIVISION



ORIGINAL

TWO-YEAR TECHNICAL ASSOCIATE IN APPLIED SCIENCE DEGREE PROGRAMS

PROGRAM TITLE (Major)	JACKSON					
	ATC	NAHC	RAN	RAY	UTI	VWC
Agribusiness Management Technology (1+1).....				X		
* Banking & Finance Technology						
Business & Office Technology.....	X		X	X	X	X
Administrative Support Services Technology Option (1+1)						
Business Management Technology Option						
Office Systems Technology Option (1+1)						
Child Development Technology.....	X				X	
Civil Engineering Technology.....						X
Commercial Art Technology.....				X		
Computer Programming Technology.....				X	X	
Dental Assisting Technology (1+1).....		X				
Drafting & Design Technology.....	X			X	X	
Architectural Drafting Technology Option						
General Drafting Technology Option						
Geographic Information Systems Technology Option.....	X					
Mechanical Drafting Technology Option						
Electrical & Electronics Technology						
Communications Electronics Repair Technology (1+1).....	X					
Computer Servicing Technology Option (1+1).....	X					
Electronics Technology Option.....			X	X	X	
Telecommunications Technology Option.....	X				X	
Emergency Medical Technology-Paramedic (1+1).....		X				
Fashion Merchandising Technology.....				X		
Food Processing Technology (1+1).....				X		
General Technology.....	X	X	X	X	X	X
Hospitality & Tourism Management Technology.....	X					
Culinary Arts Technology Option (1+1)						
Hotel & Restaurant Management Technology Option						
Interpreter Training Technology.....				X		
Landscape Management Technology (1+1).....				X		
Marketing Management Technology						
General Marketing Management Technology Option.....			X	X		
* Real Estate Technology Option.....				EVE		
Media Technology.....					X	
Medical Assisting Technology.....			X			
Medical Laboratory Technology.....		X				
Medical Record Technology (Health Information Management Technology)....		X				
Paralegal Technology.....	X			X		
Physical Therapist Assistant Technology.....		X				
* Postal Management Technology.....	EVE					
Quality Assurance Technology.....	X					
Radiography Technology.....		X				
Respiratory Care Technology (1+1).....		X				
* Supervision & Management Technology.....				BIG		
Surgical Technology (1+1).....		X				
Veterinary Technology (1+1).....				X		

ORIGINAL

ONE-YEAR AND TWO-YEAR VOCATIONAL CERTIFICATE PROGRAMS

PROGRAM TITLE (Major)	JACKSON					
	ATC	NAHC	RAN	RAY	UTI	VWC
Airframe & Powerplant Maintenance				X		
Automotive Body and Frame Repair				X	X	
Automotive Machinist				X		
Automotive Mechanics				X	X	
Automotive Vehicles & Accessories Marketing				X		
Barbering				X	X	
Building Construction						
Brick, Block & Stonemasonry Option				X	X	
Residential Carpentry Option				X	X	
Clothing & Textiles Services					X	
Communications Electronics Repair	X			X		
Cosmetology					X	
Electricity & Wiring				X		
Food Production & Management					X	
Graphic & Printing Communications				X		
Heavy Equipment Maintenance (Diesel/Truck Mechanics)				X		
Industrial Drafting				X		
Industrial Maintenance Trades					X	EVE
Machine Shop				X		
Meat Merchandising				X		
Office Machine Repair				X		
Practical Nursing		X				X
Refrigeration & Air Conditioning				X		
Welding				X	X	

- Note(s):
- 1) Related Studies I and/or II are required in each of the above programs except for students who are exempt from these courses based upon basic and academic skills competency testing.
 - 2) Courses with the phrase "Essential Skills for ..." in the course title contain the basic vocational skills necessary for success in the chosen occupational program of study. Although normally listed in the summer session preceding first year-first semester courses, in most cases the "Essential Skills" course may also be taken concurrent with other first semester courses. Those who have satisfactorily completed the related high school vocational program, or who otherwise demonstrate comparable proficiency, are exempt from taking the "Essential Skills" course.
 - 3) Most programs permit new students to enroll at the beginning of either the fall semester (August) or spring semester. In addition, several programs also permit new student enrollments at mid-semester (October and March) or during the summer (June).
 - 4) Summer classes are not offered at all campus locations.

ORIGINAL

c. **Transportation.**

1) Is the activity served by public transportation?

	<u>Yes</u>	<u>No</u>
Bus:	<u>X</u>	—
Rail:	<u>X</u>	—
Subway:	—	<u>X</u>
Ferry:	—	<u>X</u>

Source of Data (3.c.1) Transportation: CO, NAVRESCEN JACKSON, MS

2) IDENTIFY THE LOCATION OF THE PUBLIC TRANSPORTATION:

BUS - 75 YARDS FROM NAVRESCEN JACKSON

RAILROAD - 1.5 MILES FROM NAVRESCEN JACKSON

Source of Data (3.c.2) Transportation: CO, NAVRESCEN JACKSON, MS

3) Identify the name and location of the nearest commercial airport (with public carriers, e.g., USAIR, United, etc.) and the distance from the activity to the airport.

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ORIGINAL

Source of Data (3.c.3) Transportation: JACKSON INTERNATIONAL AIRPORT

4) How many carriers are available at this airport?

DELTA	US AIR
CONTENENTAL EXPRESS	AMERICAN EAGLE
NORTH WEST ARLINK	DELTA ASA

Source of Data (3.c.4) Transportation: JACKSON INTERNATIONAL AIRPORT



ORIGINAL

5) What is the Interstate route number and distance, in miles, from the activity to the nearest Interstate highway?

I-55; 0.3 MILES

Source of Data (3.c.5) Transportation): CO, NAVRESCEN JACKSON, MS

6) Access to Base:

a) Describe the quality and capacity of the road systems providing access to the base, specifically during peak periods. (Include both information on the area surrounding the base and information on access to the base, e.g., numbers of gates, congestion prob

EXCELLENT ACCESSIBILITY, ROAD QUALITY IS GOOD, NO PROBLEM WITH CONGESTION, NO GATES.

b) Do access roads transit residential neighborhoods?

NO

c) Are there any easements that preclude expansion of the access road system?

NO

d) Are there any man-made barriers that inhibit traffic flow (e.g., draw bridges, etc.)?

NO

Source of Data (3.c.6) Transportation): CO, NAVRESCEN JACKSON, MS

UIC: 61955



ORIGINAL

d. **Fire Protection/Hazardous Materials Incidents.** Does the activity have an agreement with the local community for fire protection or hazardous materials incidents? Explain the nature of the agreement and identify the provider of the service.

YES, THE JACKSON FIRE DEPARTMENT RESPONDS TO ALL FIRES AND HAZMAT INCIDENTS; HOWEVER NO AGREEMENT IN WRITING EXISTS.

Source of Data (3.d. Fire/Hazmat): CO, NAVRESCEN JACKSON

e. **Police Protection.**

1) What is the level of legislative jurisdiction held by the installation? **CONCURRENT**

~~NONE~~ (ALL CRIME CASES WOULD FALL UNDER JACKSON POLICE DEPARTMENT) **JCH RC-10 8 July 94**

2) If there is more than one level of legislative jurisdiction for installation property, provide a brief narrative description of the areas covered by each level of legislative jurisdiction and whether there are separate agreements for local law enforcement protection.

~~NO~~ **NONE JCH RC-10 8 July 94**

3) Does the activity have a specific written agreement with local law enforcement concerning the provision of local police protection?

NO

4) If agreements exist with more than one local law enforcement entity, provide a brief narrative description of whom the agreement is with and what services are covered.

N/A

5) If military law enforcement officials are routinely augmented by officials of other federal agencies (BLM, Forest Service, etc.), identify any written agreements covering such services and briefly describe the level of support received.

N/A

Source of Data (3.e. 1) - 5) - Police): CDR DERIVAUX, JAGCORPS/JACKSON POLICE DEPARTMENT / **CNRF 003**



ORIGINAL

f. **Utilities.** NO WRITTEN OR ORAL AGREEMENTS EXIST.

1) Does the activity have an agreement with the local community for water, refuse disposal, power or any other utility requirements? Explain the nature of the agreement and identify the provider of the service.

ALL UTILITIES ARE PROVIDED FROM THE FOLLOWING COMPANIES:

ELECTRICITY	-	MISSISSIPPI POWER AND	TELEPHONE	-	SOUTH CENTRAL BELL/AT&T
		LIGHT/ENTERGY	REFUSE	-	BFI
GAS	-	MISSISSIPPI VALLEY	WATER	-	JACKSON WATER/SEWER ADMINISTRATION

2) Has the activity been subject to water rationing or interruption of delivery during the last five years? If so, identify time period during which rationing existed and the restrictions imposed. Were activity operations affected by these situations? If so, explain extent of impact.

NO

3) Has the activity been subject to any other significant disruptions in utility service, e.g., electrical "brown outs", "rolling black outs", etc., during the last five years? If so, identify time period(s) covered and extent/nature of restrictions/disruption. Were activity operations affected by these situations? If so, explain extent of impact.

NO

Source of Data (3.f. 1) - 3) Utilities): 1) CO, NAVRESCEN JACKSON, MS
2) JACKSON WATER/SEWER ADMINISTRATION
3) MISSISSIPPI POWER AND LIGHT

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ORIGINAL

4. **Business Profile.** List the top ten employers in the geographic area defined by your response to question 1.b. (page 3), taken in the aggregate, (include your activity, if appropriate):

Employer	Product/Service	No. of Employees
1. STATE OF MISSISSIPPI	STATE GOVERNMENT	11,700
2. UNITED STATES GOVERNMENT	FEDERAL GOVERNMENT	5,475
3. UNIVERSITY OF MISSISSIPPI MEDICAL CENTER	ACADEMIC HEALTH SC.	4,800
4. JACKSON MUNICIPAL SEPARATE SCHOOL DISTRICT	EDUCATION	4,254
5. MISSISSIPPI BAPTIST MEDICAL CENTER	HOSPITAL	2,879
6. CITY OF JACKSON	CITY GOVERNMENT	2,464
7. MISSISSIPPI STATE HOSPITAL	HOSPITAL	2,054
8. SOUTH CENTRAL BELL	TELECOMM	2,017
9. JITNEY JUNGLE STORES OF AMERICA	GROCERY	2,004
10. KROGER COMPANY	GROCERY STORE	1,800

Source of Data (4. Business Profile): JACKSON CITY COMMENCE PERSONNEL DIRECTOR OF RESEARCH



ORIGINAL

5. **Other Socio-Economic Impacts.** For each of the following areas, describe other recent (past 5 years), on-going or projected economic impacts (both positive and negative) on the geographic region defined by your response to question 1.b. (page 3), in the aggregate:

a. **Loss of Major Employers:**

PROJECTED CLOSURES FY 1995/EMPLOYEES:
JOSTENS PHOTOGRAPHY/APPX. 1,000
BORDENS FOOD SERVICE/APPX. 200
L'EGGS PRODUCTS/APPX. 125

b. **Introduction of New Businesses/Technologies:**

SEE ATTACHED (i.e. pg. 30a)

c. **Natural Disasters:**

ICE STORM - DEC. 1989

d. **Overall Economic Trends:**

SEE ATTACHED BUSINESS TRENDS REPORTS (i.e. pg. 30b-30e)

Source of Data (5. Other Socio/Econ): JACKSON CHAMBER OF COMMENCE

6. **Other.** Identify any contributions of your activity to the local community not discussed elsewhere in this response.

STEW POT (LOCAL SOUP KITCHEN), PARADES, FUNERALS, OTHER COMMUNITY INVOLVEMENT

Source of Data (6. Other): CO, NAVRESCEN JACKSON, MS



ORIGINAL

METRO JACKSON CHAMBER OF COMMERCE

10/93

YEAR		MADISON	RANKIN	TOTAL MSA
1975	558	61	120	739
1976	695	56	107	858
1977	629	65	139	833
1978	874	81	182	1,137
1979	830	76	173	1,079
1980	769	72	143	984
1981	719	62	157	938
1982	676	53	156	885
1983	676	63	142	881
1984	675	84	173	932
1985	686	111	172	969
1986	633	111	187	931
1987	741	102	190	1,033
1988	643	101	196	940
1989	658	132	183	973
1990	664	125	184	973
1991	623	121	187	931
1992	660	155	191	1,006

SOURCE: MS Employment Security Commission, MISSISSIPPI'S BUSINESS POPULATION, 1975 thru 1992.

JACKSON BUSINESS REVIEW

ORIGINAL

	1989 DECEMBER	1990 DECEMBER	% CHANGE	1989 Y-T-D	1990 Y-T-D	% CHANGE
Building Permit Values City of Jackson	\$ 10,761,913	\$ 2,805,743	-73.9	\$ 98,945,481	\$ 99,947,265	1.0
Number of New Residences City of Jackson	18	7	-61.1	380	247	-35.0
Building Permit Values Hinds County excluding City of Jackson	\$ 1,398,485	\$ 1,003,480	-28.2	\$ 25,575,722	\$ 23,610,669	-7.7
Number of New Residences Hinds County excluding City of Jackson	15	15	0	318	328	3.1
Electric Customers - MP&L Jackson Metro Area	135,197	136,164	.7	135,197	136,164	.7
Industrial KWH Power Sales - MP&L Jackson Metro Area	58,437,795	59,567,731	1.9	725,719,715	815,322,238	12.3
Gas Customers City of Jackson	73,054	72,932	-.2	73,054	72,932	-.2
Airline Passenger Boardings City of Jackson	32,057	31,716	-1.1	405,875	406,408	.1
Post Office Receipts Jackson Post Office	\$ 9,092,147	\$ 11,147,489	22.6	\$ 57,035,852	\$ 59,773,431	4.8
License Plates Issued Hinds County	2,391	2,651	10.9	45,337	42,590	-6.1
Warranty Deeds Recorded Hinds County	399	578	-2.0	7,601	7,313	-3.8
Wage & Salaried Employment Jackson Metro Area	186,350	190,400	1.1	188,350	190,400	1.1
Sales Tax Collections City of Jackson	\$ 2,014,107	\$ 2,328,552	15.6	\$ 25,855,774	\$ 26,219,989	1.4

SOURCE: Compiled by Jackson Chamber of Commerce from City of Jackson Building and Permit Department, Hinds County Department of Permit and Zoning, Mississippi Power & Light Company, Mississippi Valley Gas Company, Jackson International Airport, U. S. Postal Service, Hinds County Tax Assessor, Hinds County Tax Assessor's Office, Mississippi Employment Security Commission, and Mississippi State Tax Commission.

PREPARED BY:
INFORMATION SERVICES DEPARTMENT

BUSINESS TRENDS

	1990 DECEMBER	1991 DECEMBER	% CHANGE	1990 Y-T-D	1991 Y-T-D	% CHANGE
BUILDING PERMIT VALUES City of Jackson	\$ 2,805,743	\$ 7,112,336	153.5	\$ 99,947,265	\$ 89,986,396	-10.0
NUMBER OF NEW RESIDENCES City of Jackson	7	11	57.1	247	197	-20.2
BUILDING PERMIT VALUES - Revised Figures Hinds County excluding City of Jackson	\$ 1,003,480	\$ 1,836,745	83.0	\$ 23,610,669	\$ 22,306,549	-5.5
NUMBER OF NEW RESIDENCES - Revised Figures Hinds County excluding City of Jackson	15	27	80.0	328	289	-11.9
ELECTRIC CUSTOMERS - MP&L Jackson Metro Area	136,164	139,071	2.1	136,164	139,071	2.1
INDUSTRIAL KWH POWER SALES - MP&L Jackson Metro Area	59,567,731	66,759,620	12.1	815,322,238	786,439,831	-3.5
GAS CUSTOMERS City of Jackson	72,932	73,736	1.1	72,932	73,736	1.1
AIRLINE PASSENGER BOARDINGS City of Jackson	31,716	32,970	4.0	406,408	395,437	-2.7
POST OFFICE RECEIPTS Jackson Post Office	\$ 11,147,489	\$ 10,493,422	-5.9	\$ 59,773,431	\$ 66,160,487	10.7
LICENSE PLATES ISSUED Hinds County	2,651	3,057	15.3	42,590	42,550	-.1
WARRANTY DEEDS RECORDED Hinds County	578	626	8.3	7,313	6,919	-5.4
WAGE & SALARIED EMPLOYMENT Jackson Metro Area	190,400	190,500	.1	190,400	190,500	.1
SALES TAX COLLECTIONS City of Jackson - Revised Figures	\$ 2,328,552	\$ 2,344,420	.7	\$ 26,219,989	\$ 27,138,610	3.5

SOURCE: Compiled by Jackson Chamber of Commerce from City of Jackson Building and Permit Department, Hinds County Department of Permit and Zoning, Mississippi Power & Light Company, Mississippi Valley Gas Company, Jackson International Airport, U. S. Postal Service, Hinds County Tax Assessor, Hinds County Tax Assessor's Office, Mississippi Employment Security Commission, and Mississippi State Tax Commission.

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BUSINESS TRENDS

	1991 DECEMBER	1992 DECEMBER	% CHANGE	1991 Y-T-D	1992 Y-T-D	% CHANGE
BUILDING PERMIT VALUES City of Jackson	\$ 7,112,336	\$ 10,161,162	42.9	\$ 89,986,396	\$ 71,912,802	-20.1
NUMBER OF NEW RESIDENCES City of Jackson	11	5	-54.5	197	125	-36.5
BUILDING PERMIT VALUES - Revised Figures Hinds County excluding City of Jackson	\$ 1,836,745	\$ 816,330	-55.6	\$ 22,306,549	\$ 51,314,620	130.0
NUMBER OF NEW RESIDENCES - Revised Figures Hinds County excluding City of Jackson	27	12	-55.6	289	387	33.9
ELECTRIC CUSTOMERS - MP&L Jackson Metro Area	139,071	140,222	.8	139,071	140,222	.8
INDUSTRIAL KWH POWER SALES - MP&L Jackson Metro Area	66,759,620	64,218,450	-3.8	786,439,831	817,344,094	3.9
GAS CUSTOMERS City of Jackson	73,736	74,280	.7	73,736	74,280	.7
AIRLINE PASSENGER BOARDINGS City of Jackson	32,970	33,622	2.0	395,437	420,821	6.4
POST OFFICE RECEIPTS Jackson Post Office	\$ 10,493,422	\$ 10,088,287	-3.9	\$ 66,160,487	\$ 63,566,931	-3.9
LICENSE PLATES ISSUED - Hinds County 1992 Figure - Reflects New Metal Tags	3,057	11,796	285.9	42,550	70,316	65.3
WARRANTY DEEDS RECORDED Hinds County	626	747	19.3	6,919	7,168	3.6
WAGE & SALARIED EMPLOYMENT Jackson Metro Area	190,500	189,350	-.6	190,500	189,350	-.6
SALES TAX COLLECTIONS City of Jackson - Revised Figures	\$ 2,344,420	\$ 2,251,040	-4.0	\$ 27,114,742	\$ 26,600,954	-1.9

SOURCE: Compiled by Metro Jackson Chamber of Commerce from City of Jackson Building and Permit Department, Hinds County Department of Permit and Zoning, Mississippi Power & Light Company, Mississippi Valley Gas Company, Jackson International Airport, U. S. Postal Service, Hinds County Tax Assessor, Hinds County Tax Assessor's Office, Mississippi Employment Security Commission, and Mississippi State Tax Commission.

JACKSON BUSINESS TRENDS

	1992 DECEMBER	1993 DECEMBER	% CHANGE	1992 Y-T-D	1993 Y-T-D	% CHANGE
BUILDING PERMIT VALUES City of Jackson	\$ 10,161,162	\$ 3,450,898	-66.0	\$ 71,912,802	\$ 126,486,147	75.9
NUMBER OF NEW RESIDENCES City of Jackson	5	4	-20.0	125	293	134.4
BUILDING PERMIT VALUES Hinds County excluding City of Jackson	\$ 816,330	\$ 2,405,190	194.6	\$ 51,314,620	\$ 94,758,108	84.7
NUMBER OF NEW RESIDENCES Hinds County excluding City of Jackson	12	27	125.0	387	351	-9.3
ELECTRIC CUSTOMERS - MP&L Jackson Metro Area	140,222	142,901	1.9	140,222	142,901	1.9
INDUSTRIAL KWH POWER SALES - MP&L Jackson Metro Area	64,218,450	82,302,161	28.2	917,344,094	905,760,802	10.8
GAS CUSTOMER - MS Valley Gas City of Jackson	74,280	74,616	.5	74,280	74,616	.5
AIRLINE PASSENGER BOARDINGS City of Jackson	33,622	31,729	-5.6	420,821	415,802	-1.2
POST OFFICE RECEIPTS Jackson Post Office	\$ 10,088,287	\$ 11,444,772	13.4	\$ 63,566,931	\$ 68,597,571	7.9
LICENSE PLATES ISSUED - Hinds County 10/92 thru 9/93-Reflects New Metal Tags	11,796	4,826	-59.1	70,316	144,179	105.0
WARRANTY DEEDS RECORDED Hinds County	747	647	-13.4	7,168	7,395	3.2
WAGE & SALARIED EMPLOYMENT Jackson Metro Area	189,350	196,500	3.8	189,350	196,500	3.8
SALES TAX COLLECTIONS City of Jackson	\$ 2,251,040	\$ 2,471,312	9.8	\$ 26,600,954	\$ 29,097,612	9.4

SOURCE: Compiled by Metro Jackson Chamber of Commerce from City of Jackson Building and Permit Department, Hinds County Department of Permit and Zoning, Mississippi Power & Light Company, Mississippi Valley Gas Company, Jackson International Airport, U. S. Postal Service, Hinds County Tax Assessor, Hinds County Tax Assessor's Office, Mississippi Employment Security Commission, and Mississippi State Tax Commission.

ORIGINAL

I certify that the information contained herein is accurate and complete to the best of my knowledge and belief.

NEXT ECHELON LEVEL (if applicable)

F. E. CURRAN, CAPT, USNR
NAME (Please type or print)

F. E. Curran
Signature

Commander - Acting
Title

JUL 08 1994
Date

Naval Reserve Readiness Command Region TEN
Activity

I certify that the information contained herein is accurate and complete to the best of my knowledge and belief.

NEXT ECHELON LEVEL (if applicable)

JOHN B. BELL, CAPT, USNR
COMMANDER - ACTING
COMNAVSURFRESFOR

John B. Bell
Signature
12 JUL 1994
Date

Activity

I certify that the information contained herein is accurate and complete to the best of my knowledge and belief.

MAJOR CLAIMANT LEVEL

T. F. HALL
NAME (Please type or print)

T. F. Hall
Signature

Commander, Naval Reserve Force
4450 Dauphine St.
Title New Orleans, LA 70146

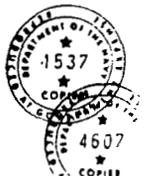
7/25/94
Date

Activity

and: Chief of Naval Operations (N095)
2000 Navy Pentagon
Washington, DC 20350-2000

N61955 NAVRESCEN JACKSON, MS

ORIGINAL



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BRAC-95 CERTIFICATION

Reference: SECNAVNOTE 11000 of 08 December 1993

In accordance with policy set forth by the Secretary of the Navy, personnel of the Department of the Navy, uniformed and civilian, who provide information for use in the BRAC-95 process are required to provide a signed certification that states "I certify that the information contained herein is accurate and complete to the best of my knowledge and belief." The signing of this certification constitutes a representation that the certifying official has reviewed the information and either (1) personally vouches for its accuracy and completeness or (2) has possession of, and is relying upon, a certification executed by a competent subordinate.

Each individual in your activity generating information for the BRAC-95 process must certify that information. Enclosure (1) is provided for individual certifications and may be duplicated as necessary. You are directed to maintain those certifications at your activity for audit purposes. For purposes of this certification sheet, the commander of the activity will begin the certification process and each reporting senior in the Chain of Command reviewing the information will also sign this certification sheet. This sheet must remain attached to this package and be forwarded up the Chain of Command. Copies must be retained by each level in the Chain of Command for audit purposes.

I certify that the information contained herein is accurate and complete to the best of my knowledge and belief.

ACTIVITY COMMANDER

J.A. SLAY
NAME (Please type or print)
COMMANDING OFFICER
Title
NAVRESGEN JACKSON
Activity

[Signature]
Signature
6-30-94
Date



uic: 61955

Date Call 65

I certify that the information contained herein is accurate and complete to the best of my knowledge and belief.

NEXT ECHELON LEVEL (if applicable)

F. E. CURRAN, CAPT, USNR
NAME (Please type or print)

[Signature]
Signature

Commander - Acting
Title

2 SEP 94
Date

Naval Reserve Readiness Command Region TEN
Activity

I certify that the information contained herein is accurate and complete to the best of my knowledge and belief.

NEXT ECHELON LEVEL (if applicable)

JOHN B. BELL, CAPT, USNR
COMMANDER - ACTING
COMNAVSURFRESFOR

[Signature]
Signature

30 SEP 1994
Date

Activity

I certify that the information contained herein is accurate and complete to the best of my knowledge and belief.

CNO/MAJOR CLAIMANT LEVEL

T. F. HALL
NAME (Please type or print)

TF Hall
Signature

COMMANDER NAVAL RESERVE FORCE
Title

10/13/94
Date

DIRECTOR OF THE NAVAL RESERVE (CNO NO95)
Activity

N61955 NAVRESCEN JACKSON, MS

ORIGINAL



61955

Dts Cill 65

BRAC-95 CERTIFICATION

Reference: SECNAVNOTE 11000 of 08 December 1993

In accordance with policy set forth by the Secretary of the Navy, personnel of the Department of the Navy, uniformed and civilian, who provide information for use in the BRAC-95 process are required to provide a signed certification that states "I certify that the information contained herein is accurate and complete to the best of my knowledge and belief." The signing of this certification constitutes a representation that the certifying official has reviewed the information and either (1) personally vouches for its accuracy and completeness or (2) has possession of, and is relying upon, a certification executed by a competent subordinate.

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I certify that the information contained herein is accurate and complete to the best of my knowledge and belief.

ACTIVITY COMMANDER

J. A. SLAY, LCDR, USNR
NAME (Please type or print)

J. A. Slay
Signature

COMMANDING OFFICER
Title

9-1-94
Date

NAVRESCEN, JACKSON, MS
Activity

ORIGINAL





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ORIGINAL

**MILITARY VALUE ANALYSIS
DATA CALL WORK SHEET FOR:**

Naval & Reserve Center, Jackson, MS. 39201

ACTIVITY UIC: N61955

Category.....Personnel Support
Subcategory.....Reserve Training Centers
Type.....Navy and Marine Corps Reserve Training Centers

*****If any responses are classified, attach a separate classified annex*****

ENCLOSURE (6)

UIC: N61955



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Introduction

1. **Purpose.** This introduction provides general instructions for replying to this data call; individual questions and footnotes give specific instructions for completion of tables, computations, etc.

2. References

a. Refer to the NAVFAC P-72 for Facility (drill space) Category Code Numbers (CCNs).

b. Refer to the NAVFAC P-72 for Facility Category Code Numbers (CCNs).

c. NAVFAC P-80 provides a discussion of the general nature of each CCN; use it to delineate "types" of facilities that share a common CCN.

d. Refer to NAVFACINST 11010.44E for definition of adequate, substandard, and inadequate facilities.

3. Definition of Terms. For purposes of this data call the following apply:

a. A **Course of Instruction** (i.e. Navy Rights and Responsibilities Workshop, Operations Security) comprises one or more individual contact periods (classes).

b. A **Facility** is a space (e.g. a room), a defined area (e.g. a range), a structure (e.g. a building), or a structure other than a building (e.g. an obstacle course); it is possible for a building to house one or more facilities of different types.

4. Coordinating Instructions

a. Enter the primary **UIC of the data call respondent** at the bottom of each page of the response; ensure that additional pages created include this identifier.

b. Where information about current facilities available is requested, include MILCON projects that are not BRAC related, which have been authorized and appropriated and for which contracts are to be awarded by 30 September 1994; *do not* include projects submitted in the FY 95 Presidential Budget. Proposed MILCON projects in support of previous BRAC decisions should be included in response by gaining activities but excluded from closing or losing activities.

c. If any of the information requested is subject to change between now and the end of Fiscal Year 2001 due to known redesignations, realignments/closures or other action, provide current and projected data and so annotate.

d. Tenant activities of a Reserve Training Center that use space must be accounted for under the Reserve Command/Center UIC for all courses taught and classroom space utilized.

e. Unless specified otherwise, "throughput" figures should include that from all sources (DON, other DoD, reserve and/or active components, and non-DoD).

f.. Use "N/A" to respond to a question and/or table that does not apply; provide the reason(s) why it is not applicable.

i. Provide best estimates where projections of future requirements are requested.

14-00000 14-00000 14-45 NO.000 P.10

MISSION REQUIREMENTS

Mission Statement: State the mission of this Reserve Command/Center in sufficient detail that it can be distinguished from other Reserve facilities.

Naval Reserve Center Jackson's mission is to provide trained units and qualified persons available for active duty in the Armed Forces in time of war or national emergency and at such other times as the National Security requires (per Section 262 of Title 10, U. S. C.) for the following units:

NR VOLTRAUNIT 0905
NR FH COMMZ 11 DET P0935A
NR FFG-20 ANTRIM 2009
NR NAV HOSP PENSACOLA 1910
NMCB 28 DET 1028
NR NAVACTS UK 209
NR LSO MEMPHIS 209
NR MOBASCONTGRP 0905
NR FH 500 COMMZ-11 DET I
NR 4FSSG 4MB CCA MSE2A

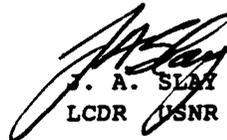
SPECIAL INSTRUCTIONS CONCERNING INTERPRETATION OF ATTACHED INPUT:

Per para 4.c. of the "Coordinating Instructions", the information provided herein is based upon current facilities located in Jackson, Mississippi. As of September 1995, NAVRESCEN Jackson will move approximately 100 miles east to Meridian, Mississippi, be redesignated as NAVRESCEN Meridian, and become a tenant command aboard Naval Air Station (NAS) Meridian. This project is not a MILCON project, but nonetheless has been authorized and appropriated for FY-95.

The move to Meridian will have little to no impact on the majority of the information requested in this Data Call; that is we do not anticipate any significant fluctuation in our drilling population as a result of this move. Furthermore, the new facility we will occupy in Meridian is nearly identical in square footage to our current facility and therefore answers to any questions concerning facilities will be valid for both geographical locations.

Nonetheless, for any questions where "projected" data (based on our FY 95 relocation to Meridian) is appropriate, such projected data has been provided in brackets ([]'s) immediately following data based on our current location. Conversely, if no bracketed data is provided for a particular response, this should be interpreted to mean that the Meridian move in FY 95 will have no bearing on that issue. As requested, all information provided, bracketed or otherwise, projects through FY 2001.

Finally, in regards to a majority of the Quality of Life (QOL) questions herein, "projected" answers for FY 96 and beyond (i.e. from a NAS Meridian perspective) are not addressed for two reasons. First and foremost, as a future tenant command of NAS Meridian (UIC: 43324), I interpret my command (UIC: 61955) and its associated resources to be my building, its immediate grounds, and some limited parking spaces; not the "base" as a whole. Secondly, providing such information from an NAS Meridian perspective would be a duplication of effort, as NAS Meridian (UIC: 43324) has provided this identical information via their BRAC 95 Data Call package.


J. A. SLAY
LCDR USNR

Mission Requirements

2. For the instruction conducted by your personnel away from the Reserve Command/Center during Authorized Directed Drill periods, list the type of instruction, number of training instances, and the method of instruction (i.e. off-site instructor, audio visual presentation, etc.).

INSTRUCTION	FREQUENCY OF INSTRUCTION	METHOD OF INSTRUCTION
NECAP (8404 TRNG)	5 Weekends	Off-site Instructors in Camp LeJeune, NC

3. For the instruction available at your Reserve Command/Center, list the type of instruction, number of training instances, and the method of instruction (i.e. off-site instructor, audio visual presentation, video tape, etc.) that could be conducted away from your installation during your normal Authorized/Directed drilling periods.

INSTRUCTION	FREQUENCY OF INSTRUCTION PER YR.	METHOD OF INSTRUCTION
3M	1	Off-Site instructor
Damage Control	1	Off-Site Instructor

4. List facility (drill space) uses of your Reserve Command/Center that require special/unique facilities (drill spaces) which are not reasonably available (within 100 miles) at any other Guard or Reser Command/Center.

Course	Unique/Special Facility Requirements
None	

B. Other Training Support

1. Client/Customer Base

a. List all Reserve units/tenants assigned and supported by this facility as of 30 September 1994, the UIC or identifying number, and their manning levels.

UNIT	MILITARY BRANCH	UIC	RESERVE MANNING LEVEL	ACTIVE DUTY SUPPORT MANNING LEVEL	CIVILIAN MANNING LEVEL
FTS	USNR	61955	0	10	0
PRIMUS	USNR	82935	11	0	0
FFG-20	USNR	83209	52	0	0
NAV HOS PENSA COLA	USNR	83451	1	0	0
NMCB 28	USNR	85296	36	0	0
NAVACTS	USNR	87316	60	0	0
LSO	USNR	87436	6	0	0
FH 500	USNR	88783	33	0	0
4 FSSG	USNR	89496	14	0	0

b. List all other units/groups not previously mentioned (active, reserve, guard, civilian, social agency, charitable organization, etc.) that utilizes space at your installation as of 30 September 1994.

UNIT	Facilities Used
NAVY RESERVE RECRUITERS	TWO OFFICE SPACES, 1 CLASSROOM, HEAD, PARKING 1 STORAGE SPACE.

c. For Fiscal Year 1993 list the percentage of Authorized/Directed Drill Utilization performed at the Reserve Command/Center, Gaining Command or other site.

UNIT (Navy or Marine Corps	SITE		
	Reserve Command/Center	Gaining Command	Other Site
FH COMMZ 11 DET P0935A	80%	10%	10%
FFG-20 ANTRIM 2009	85%	5%	0%
NMCB 28 DET 1028	50%	5%	45%
NAVACTS UK 209	95%	5%	0%
LSO MEM 209	30%	40%	30%
FH 500 COMMZ 11 DET I	95%	5%	0%

UNIT (Navy or Marine Corps	SITE		
	Reserve Command/Center	Gaining Command	Other Site
4 FSSG 4MB CCH MSE2A	70%	30%	

d. For fiscal years 1991, 1992 and 1993, how many reservists not assigned to your facilities performed Authorized/Directed Drills at your site (i.e. for additional duty, convenience, unique equipment or trainer unitization, etc.)? Include all military branches and supply explanation.

ESTIMATE 10 DIFFERENT SELRES (PER YEAR) CONDUCT THEIR DRILLS AT NRC JACKSON VICE THEIR PARENT RESERVE COMMAND FOR CONVENIENCE. AVERAGE 20 SELRES PER YEAR CONDUCT DRILL AT THIS CENTER IN CONJUNCTION WITH ASSIST VISITS/INSPECTIONS BY OUR ISIC.



e. What percentage of your assigned Navy and Marine Corps Reserve Units' Authorized/Directed Drill Utilization is spent in Fleet contributory (Peacetime) support both at your Reserve Command/Center and at other activities? Specify percentage and where performed.

<u>UNIT</u>	<u>Per Centage</u>	<u>Location</u>
FFG-20 ANTIRM	20%	SIMA NORVA SIMA CHARLESTON, SC SIMA MAYPORT, FL USS ANTRIM, MOBILE, AL
NAVACTS UK 209	10%	NAVACTS UNITED KINGDOM LONDON FISC PENSACOLA, FL FISC NORVA FISC CHARLESTON, SC
LSO MEMPHIS 209	40%	LSO MEMPHIS, TN NAS PENSACOLA, FL NAS MERIDIAN, MS NAS MEMPHIS, TN
FH 500 COMMZ 11 DET I	25%	VA HOSPITAL, JACKSON
4 FSSG 4MB CCA MSE2A	20%	NRC KNOXVILLE, TN NMCRC BESSEMBER, AL



4. Demographics (Duplicate All charts as necessary)

A. List the average travel distances of Navy and Marine Corps Reservists and number that travel those average distances.

	0 - 50 miles	51 - 100 miles	100+ miles
# of Personnel	140 [22]	70 [121]	20 [87]

B. List all military Guard and Reserve Command/Centers and distance within 100 miles of your reserve center:

Name of Center	miles
MS AIR NATIONAL GUARD, JACKSON, MS	10
ARMY RESERVE CENTER, JACKSON, MS	10
MARCORPSRESCEN, JACKSON, MS	10
AIR NATIONAL GUARD, MERIDIAN, MS	87
Name of Center	miles
[MS AIR NATIONAL GUARD, MERIDIAN, MS	15]
[NAVRESCEN TUSCALOSSA, AL	93]

C. List the all military Reserve Command/Centers and distance between 100 and 200 miles of your Reserve Command/Center:

Name of Center	miles
NAVRESCEN, GULFPORT, MS	160
[NAVRESCEN MOBILE, AL	133]
[NAVRESCEN BIRMINGHAM, AL	146]
[NAVRESCEN MEMPHIS, TN	200]



D. List all the Navy and Marine Corps Reserve Command/Centers in your state and the distance from your Reserve Command/Center to these centers. Indicate any shared training resources or facilities with these Reserve Command/Centers (i.e. shared equipment, instructors instruction materials, facilities (drill space) or training areas, etc, without regard to scheduling and/or manning conflicts..

Name of Center	Miles	Resources Shared
NRC GULFPORT, MS	160	Instructors, Training areas

E. List all other Guard, Reserve and non-DoD facilities within 100 miles your Reserve Command/Center that your assigned personnel could use for Authorized/Directed Drill Utilization or with which you could share resources or drill space (i.e shared equipment, instructors, instruction materials, facilities (drill space) or training areas, etc.), without regard for scheduling and/or manning conflicts.

- AIR NATIONAL GUARD 172ND MILITARY AIRLIFT GROUP
- 114TH MILITARY POLICE CO DETACHMENT
- [AIR NATIONAL GUARD, MERIDIAN]
- ARMED FORCES RESERVE CENTER (ARMY & MARINE CORPS)

F. For the entire Reserve Command/Center, summarize the average number of reservists on waiting lists for reserve billets in all units during the year. (i.e. VTU, IRR and recruits).

RESERVISTS	FISCAL YEAR 1994
OFFICER	1
ENLISTED	7

G. What are the unique demographics of your area that could help or hinder the recruitment of the type(s) and/or numbers of Navy/Marine Corps Selected Reservists needed to fulfill your requirements?(i.e. limited maritime access, small population center, etc.)

- HELP: 1 large State University, large patriotic population center, poor economy.
- HINDER: Limited Maritime access.

H. What are the unique demographics of your area that could help or hinder the recruitment of the type(s) and/or numbers of Navy/Marine Corps Selected Reservists needed to fulfill requirements at other Reserve Command/Centers? (i.e. large population center, proximity to active Navy facilities, etc.)

None

H. List any other military support missions currently conducted at/from your Reserve Command/Center (e.g., port of embarkation for USNR and USMCR personnel, other active duty/reserve

personnel or logistics transfer missions).

None

- I. Are any new military missions planned for this Reserve Command/Center?
NO.

H. Other Non-Military Support

1. Does the Reserve Command/Center have a role in a disaster assistance plan, search and rescue, or local evacuation plan? If so, describe.

NO.

2. Does the Reserve Command/Center provide any direct support to local civilian, governmental or military agencies? If so, describe (e.g. drug awareness programs, CPR Training, honor guards for funerals, color guards for civic functions, etc.)

The center conducts Campaign Drug Free presentations, funeral and CACO support, Color Guards, SeaBee support to Ducks Unlimited, and we also present speeches as requested by various organizations. Additionally, several Full Time Staff (FTS) members are very active in the local Big Brother/Big Sister Organization.

3. Are any new civilian or other non-DoD missions planned for this Reserve Command/Center? If so, describe.

NO.



Facilities

A. Facilities Description. Complete the following tables as applicable.

1. Naval Reserve Centers; Marine Corps Reserve Training & Administration Buildings; and Reserve Naval Construction Forces: In the following table, indicate the space available; average age; condition of the facility; plant value; and amount and cost of leased space. (Facility Type/Functions obtained from the Facility Planning Criteria For Navy and Marine Corps Shore Installations, NAVFAC P-80)

Facility Type/Function (in Sq. Ft. unless noted)	Av. Age	Ad-equate	Substan-dard	Inad-equate	Total	Plant Value	Leased Property (SF)	Cost of Leased Property
Admin	45	4520			4520			
Classrooms	45	7500			7500			
Trainers								
Labs	45	1300			1300			
Shops								
Bays	45	3529			3529			
Storage	45	2890			2890			
Supply	45	1377			1377			
Pistol Range (# of Facilities)								
Other Ranges (Specify) (# of Facilities)								
Armory								
Parking - POV (Sq. Yds. (SY))	10	3836			3836			
Parking - Organizational Vehicles (SY)	10	240			240			
Land (Acres)	45	1.7					1.7	\$1/year
Other Recruiting	45	480			480			
Toilets/Showers/Lounge	45	1471			1471			

The following data was derived from plant property records, which do not break down Plant Property Costs as requested above.

Facility	SQFT	Costs
Training Bld I	23,067	\$300,090
Training Bld II	8,177	\$124,551

[Meridian Facility will have essentially the same adequate square footage as above, but the average age is 33 years vice 45 years; and as a tentant command to NAS Meridian, there will be no cost to lease]

2. Give the total square footage of the facilities (drill space) at your Reserve Center. Break out the square footage by the type of facilities (i.e. classroom, assembly hall, multi-media center, etc.), and within each type, by the material condition of the facility (i.e., Adequate, Substandard, and Inadequate).

BUILDING #1:

Facility (drill space) Type	Square Footage	Adequate	Substandard	Inadequate
Training (Classrooms, Conference Room, Multi-Media)	8800	8800		
Recruiting	480	480		
Administrative Space	4520	4520		

BUILDING #2:

Facility (drill space) Type	Square Footage	Adequate	Substandard	Inadequate
Admin	4000			4000
Training	4177			4177

3. In accordance with NAVFACINST 11010.44E, an inadequate facility cannot be made adequate for its present use through "economically justifiable means." For all the categories above where inadequate facilities are identified provide the following information: BUILDING #2 INFORMATION:

- a. Facility Type/Code: 171-10
- b. What makes it inadequate? Building #2 has been abandoned since April 1979 when it was damaged by 6 feet of flood waters from the Pearl river. USMCR that occupied the building relocated across town to the Armed Forces Reserve Center.
- c. What use is being made of the facility? Limited storage.
- d. What is the cost to upgrade the facility to substandard? \$250K.
- e. What other uses could be made of the facility and at what cost? Office spaces, limited garage/work spaces, and classrooms at \$500-600K.
- f. Current improvement plans and programmed funding: None.
- g. Has the facility's condition caused a "C3" or "C4" designation on your BASEREP? N/A (We are not a base and don't file "BASEREP's.")

[Again, Meridian facility will have essentially the same space square footage as Building #1].



7. Other Training Buildings

a. Give the square footage of any training buildings listed in the table below that are available for use by your Reserve Center. Break out the square footage by the material condition of the facility (i.e., Adequate, Substandard, and Inadequate).

None.

CCN	Type of Training Building	Adequate	Substandard	Inadequate
171-17	TV CTR/Instruction Matter			
171-25	Auditorium			
171-36	Radar Simulator Facility			
171-40	Drill Hall			
171-45	Mock-up and Training Aid Preparation Center			
171-50	Small Arms Range - Indoor			
171-60	Recruit Processing Building			
171-77	Training Material Storage			

B. In accordance with NAVFACINST 11010.44E, an inadequate facility cannot be made adequate for its present use through "economically justifiable means." For all the categories above where inadequate facilities are identified provide the following information:

- a. Facility Type/Code:
- b. What makes it inadequate?
- c. What use is being made of the facility?
- d. What is the cost to upgrade the facility to substandard?
- e. What other use could be made of the facility and at what cost?
- f. Current improvement plans and programmed funding:
- g. Has the facility's condition caused a "C3" or "C4" designation on your BASEREP?

None



9. Facilities (drill space) Other Than Buildings (CCN 179)

a. Using the table, give the number of training facilities other than buildings that are available for use or owned by your Reserve Command/Center. For each type of training facility, give the number that are in adequate, substandard, and inadequate condition. For the Training Courses and Parade and Drill Fields provide number of facilities/acres.

Nothing available locally.

CCN	Training Facilities	Number of Facilities		
		Adequate	Substandard	Inadequate
179-35	Weapons Range Operations Tower			
179-40	Small Arms Range - Outdoor			
179-45	Training Mock-Ups			
179-50	Training Course			
179-55	Combat Training Pool/Tank			
179-60	Parade and Drill Field			
179-71	Electronic Warfare Training Range			
179-72	Underwater Tracking/Training Range			

10. In accordance with NAVFACINST 11010.44E, an inadequate facility cannot be made adequate for its present use through "economically justifiable means." For all the categories above where inadequate facilities are identified provide the following information:

- a. Facility Type/Code:
- b. What makes it inadequate?
- c. What use is being made of the facility?
- d. What is the cost to upgrade the facility to substandard?
- e. What other use could be made of the facility and at what cost?
- f. Current improvement plans and programmed funding:
- g. Has the facility's condition caused a "C3" or "C4" designation on your BASEREP?

11. Airfields and Airspace

a. Airspace. List any airspace utilized by units at your Reserve Command/Center.

Airspace Name	Dimensions	Scheduling Agency	Controlling Agency
None			

b. Airfields. List any airfield used by units at your Reserve Command/Center.

Airfield	Location	Ownership (Service/non-DoD)
None.		



12. Equipment Utilized

a. List any major or unique equipment, which in your opinion, would be cost prohibitive to replicate or move to a new site should you be required to close or relocate. Indicate if it is feasible to relocate the equipment, gross tonnage, cube and the estimated downtime for training if relocated.

Equipment	Relocatable (Y/N)	Gross tons	Cube (ft')	Estimated Down Time
None.				



13. Complete the following table for all areas controlled by your Reserve Command/Center or available by mutual agreement, that could be used for Authorized/Directed Drill Utilization which are considered unusable (i.e., overgrown, impassable, etc.).

Potential Area	Unusable Acres	Reason Unusable
None		

14. List possible utilization areas controlled by your Reserve Command/Center or available by mutual agreement, where availability or use is limited by concurrent use of another training area or facility (i.e., proximity of live fire range, an LZ within a larger training area, etc.).

Training Area	Limitation(s) on Use or Availability
None	

a. For each training area with environmental restriction, describe the restriction and the impact on your Authorized/Directed Drill Utilization, and any mitigation required.

We have no Training areas with enviornomental restrictions.

TRAINING AREA:
RESTRICTION:
IMPACT ON TRAINING:
MITIGATION REQUIRED:



17. For each pier/wharf listed above state today's normal loading, the maximum capacity for berthing, maximum capacity for weapons handling evolutions, and maximum capacity to conduct intermediate maintenance. **NONE**

Table 13.1

Pier/ Wharf	Typical Steady State Loading'	Ship Berthing Capacity	Ordnance Handling Pier Capacity'	IMA Maintenance Pier Capacity'

'Typical pier loading by ship class with current facility ship loading.

'List the maximum number of ships that can be moored to conduct ordnance handling evolutions at each pier/berth without berth shifts. Consider safety, ESQD and access limitations.

'List the maximum number of ships that can be serviced in maintenance availabilities at each pier without berth shifts because of crane, laydown, or access limitations.



19.a. How much pier space is required to berth and support ancillary craft (tugs, barges, floating cranes, etc.) currently at your facility? Indicate if certain piers are uniquely suited to support these craft.

NONE

19.b. What is the average pier loading in ships per day due to visiting ships at your base. Indicate if it varies significantly by season.

NONE

19.c. Given no funding or manning limits, what modifications or improvements would you make to the waterfront infrastructure to increase the cold iron ship berthing capacity of your installation? Provide a description, cost estimates, and additional capacity gained.

NONE

19d. Describe any unique limits or enhancements on the berthing of ships at specific piers at your base.

N/A



20. WEAPONS AND MUNITIONS

Please answer the following questions if your activity performs any stowage or maintenance on any of the following ordnance commodities types:

ORDNANCE COMMODITY TYPES		
Mines	Expendables	LOE: Rockets
Torpedoes	INERT	LOE: Bombs
Air Launched	CADS/PADS	LOE: Gun Ammo (20mm-16")
Threat	Strategic Nuclear	LOE: Small Arms (up to 50 cal.)
Surface Launched	Tactical Nuclear	LOE: Pyro/Demo
Threat		Grenades/Mortars
Other Threat		/Projectiles

1. Ordnance Stowage and Support

1.1 Provide present and predicted inventories (coordinate with inventory control manager) and maximum rated capability of all stowage facilities at each weapons storage location controlled by this activity. In predicting the out year facility utilization, distribute overall ordnance compliment to the most likely configuration. The maximum rated capability is also an out year projection taking into account any known or programmed upgrades that may increase current stowage capacity. When listing stowage facilities, group by location (e.g. main base, outlying field, special area).

NONE. No Ordnance is stowed onboard.

Table 1.1: Total Facility Ordnance Stowage Summary

Facility Number	PRESENT INVENTORY		PREDICTED INVENTORY FY 2001		MAXIMUM RATED CAPABILITY	
	TONS	SQ FT	TONS	SQ FT	TONS	SQ FT
TOTAL						



20. WEAPONS AND MUNITIONS, continued

1.4 Identify any restrictions which prevent maximum utilization of your facilities. If restrictions are based on facility conditions, specify reason, the cost to correct the deficiency, and identify any programmed projects that will correct the deficiency and/or increase your capability.

NONE

1.5 Identify if your activity performs any of the following functions on any of the ordnance commodities previously listed. Technical support includes planning, financial, administrative, process engineering and SOP support. Within each related function identify each ordnance commodity type for which you provide these services and the total Direct Labor Man Hours (DLMHs) expended (FY 1994); identify only those DLMHs expended by personnel under your command.

Table 1.5: Related Ordnance Support

NONE

Related Functions	Performed? (Y / N)	Type of Commodity	DLMHs
Maintenance (specify level)			
Testing			
Manufacturing			
Outload			
Technical Support			

8.



Location

1. Proximity to Reservists.

a. What is the importance of your location relative to the Reserve personnel supported?

Jackson is the geographic center of Mississippi and home to a large number of drilling reservists. Over 50% of the selres live within 10 miles of the naval reserve center, closing it would mean even longer drive for almost 80% of our drilling reservists. 30% of the SELRES are students at 3 of our local colleges.

b. On the average, how long does it take your personnel, including drilling reservists to reach your facility?

20 minutes
[2 HOURS]

2. Proximity to Transportation Nodes. How far are the nearest air, rail, sea and ground transportation nodes?

AIR: 10 miles [20 MILES]

RAIL 2 miles [18 MILES]

SEA 180 miles (To New Orleans, LA) [133 MILES (MOBILE AL)]

GROUND 0.1 miles to Interstate [12 MILES TO INTERSTATE]

3. Proximity to Mobilization Sites. What is the importance of your location given your mobilization requirements?

Very important. Our location improves our mobilization ability. Major Military Air Lift is close by at the Air National Guard Base, Thompson field, Flowood, Mississippi.



Weather

A. In Fiscal Year 1993, what percentage of drills were cancelled because reservists were unable to travel to the Reserve Command/Center due to weather conditions?

Zero

B. In Fiscal year 1993, what percentage of scheduled drills were cancelled because of weather?

Zero

Features and Capabilities

C. Unique Features

1. Does the geographic location and the associated natural features of this Reserve Command/Center contribute to the quality of training or detract from the quality of training at the installation? Explain.

The climate in Jackson ensures that drills are seldom cancelled due to inclement weather.

2. What other factors beyond your control have affected training over the past five years? Describe the resulting impact.

None.

3. Identify any unique (one of a kind) features (function, equipment, ranges, etc.) possessed by this Reserve Command/Center that have not been previously mentioned. Please list each feature separately and provide a narrative explanation of the importance of the unique feature.

None.

Features and Capabilities

E. Ability for Expansion

1. Does the operational infrastructure of the Reserve Center (e.g., classrooms, administrative facilities, fuel and munitions storage, warehouse space) provide capabilities for future expansion or change in mission? If yes, explain why.

The center has the capacity to double the number of drilling reservists by changing the number of drill weekends from one to two, and tripling the number of drilling reservists by increasing to three drill weekends.

2. What is the availability of adjacent acreage for possible future Reserve Training Center expansion or development?

Building #2, the abandoned USMCR building located at the rear of the facility grounds, currently inadequate, could be renovated. If refurbished, it could potentially provide an additional 4080 Sq ft of administrative space, and 4177 Sq ft of training space. If it was brought back on line an additional 150 drilling reservists (one drill weekend/month) to 300 drilling reservists (two drill weekends/month) could be accommodated.



Features and Capabilities

3. Identify in the table below the real estate resources which have the potential to facilitate future development and for which you are the plant account holder or into which, though a tenant, your activity could reasonable expect to expand. Complete a separate table for each individual site, i.e., main base, outlying airfields, special off-site areas, off base housing, etc. Unit of measure is acres. Developed area is defined as land currently with buildings, roads, and utilities that prevent it from being further developed without demolition of existing infrastructure. Include in "Restricted" areas that are restricted for future development due to environmental constraints (e.g. wet lands, landfills, archaeological sites), operational restrictions (e.g. ESQD arcs, HERO, HERP, HERF, AICUZ, ranges) or cultural resources. Identify the reason for the restriction when providing the acreage in the table below. Specify any other entry in "Other" (e.g. submerged lands).

Site location: Naval Reserve Center Jackson MS

Land Use	Total Acres	Developed	Available for Development	
			Restricted	Unrestricted
Operational				
Training				
Maintenance				
Research & Development				
Supply and Storage				
Admin				
Housing				
Recreational				
Navy Forestry Program				
Navy Agricultural Outlease Program				
Hunting/fishing Programs				
Other				
TOTAL				

Features and Capabilities

E. Ability for Expansion (cont.)

4. Identify the features of this Reserve Center that make it a strong candidate for supporting other types of training and units in the future.

The center is currently only drilling one weekend per month, eight months per year; two weekends per month, four months per year. Therefore we have the ability to increase our drilling weekends to accomodate more units.



F. Quality of Life

1. Military Housing NO MILITARY HOUSING.

(a) Family Housing:

(1) Do you have mandatory assignment to on-base housing? (circle) yes no

(2) For military family housing in your locale provide the following information:

Type of Quarters	Number of Bedrooms	Total number of units	Number Adequate	Number Substandard	Number Inadequate
Officer					
Officer					
Officer					
Enlisted					
Enlisted					
Enlisted					
Mobile Homes					
Mobile Home lots					

(3) In accordance with NAVFACINST 11010.44E, an inadequate facility cannot be made adequate for its present use through "economically justifiable means". For all the categories above where inadequate facilities are identified provide the following information:

Facility type/code:

What makes it inadequate?

What use is being made of the facility?

What is the cost to upgrade the facility to substandard?

What other use could be made of the facility and at what cost?

Current improvement plans and programmed funding:

Has this facility condition resulted in C3 or C4 designation on your BASEREP?

Features and Capabilities

F. Quality of Life (cont.)

(4) Complete the following table for the military housing waiting list.

Closest Military housing is 112 miles away, therefore, no FTS personnel is on the list

Pay Grade	Number of Bedrooms	Number on List	Average Wait
O-6/7/8/9			
O-4/5			
O-1/2/3/CWO			
E7-E9			
E1-E6			

As of 31 March 1994.



Features and Capabilities

F. Quality of Life (cont.)

(5) What do you consider to be the top five factors driving the demand for base housing? Does it vary by grade category? If so provide details. N/A. No military housing

Top Five Factors Driving the Demand for Base Housing	
1	
2	
3	
4	
5	

(6) What percent of your family housing units have all the amenities required by "The Facility Planning & Design Guide" (Military Handbook 1190 & Military Handbook 1035-Family Housing)?

(7) Provide the utilization rate for family housing for FY 1993.

Type of Quarters	Utilization Rate
Adequate	
Substandard	
Inadequate	

(8) As of 31 March 1994, have you experienced much of a change since FY 1993? If so, why? If occupancy is under 98% (or vacancy over 2%), is there a reason?

Features and Capabilities

F. Quality of Life (cont.)

(b) BEQ: N/A. No BEQ Available

(1) Provide the utilization rate for BEQs for FY 1993.

Type of Quarters	Utilization Rate
Adequate	
Substandard	
Inadequate	

(2) As of 31 March 1994, have you experienced much of a change since FY 1993? If so, why? If occupancy is under 95% (or vacancy over 5%), is there a reason?

(3) Calculate the Average on Board (AOB) for geographic bachelors as follows:

$$AOB = \frac{(\# \text{ Geographic Bachelors} \times \text{average number of days in barracks})}{365}$$

(4) Indicate in the following chart the percentage of geographic bachelors (GB) by category of reasons for family separation. Provide comments as necessary.

Reason for Separation from Family	Number of GB	Percent of GB	Comments
Spouse Employment (non-military)	1	100	Wife was unable to find job in the area, so she remained in Georgia where she was employed.
Other			
TOTAL	1	100	

(5) How many geographic bachelors do not live on base? 1



Features and Capabilities

F. Quality of Life (cont.)

(c) BOQ: NO BOQ AVAILABLE

(1) Provide the utilization rate for BOQs for FY 1993.

Type of Quarters	Utilization Rate
Adequate	
Substandard	
Inadequate	

(2) As of 31 March 1994, have you experienced much of a change since FY 1993? If so, why? If occupancy is under 95% (or vacancy over 5%), is there a reason?

(3) Calculate the Average on Board (AOB) for geographic bachelors as follows:

$$AOB = \frac{(\# \text{ Geographic Bachelors} \times \text{average number of days in barracks})}{365}$$

(4) Indicate in the following chart the percentage of geographic bachelors (GB) by category of reasons for family separation. Provide comments as necessary.

Reason for Separation from Family	Number of GB	Percent of GB	Comments
Family Commitments (children in school, financial, etc.)	0		
Spouse Employment (non-military)	0		
Other			
TOTAL	0	100	

(5) How many geographic bachelors do not live on base? **NO OFFICER GEOGRAPHIC BACHELORS.**



Features and Capabilities

F. Quality of Life (cont.)

2. For on-base MWR facilities' available, complete the following table for each separate location. For off-base government owned or leased recreation facilities indicate distance from base. If there are any facilities not listed, include them at the bottom of the table.

Facility	Unit of Measure	Total	Profitable (Y,N,N/A)
Auto Hobby	Indoor Bays	0	
	Outdoor Bays	0	
Arts/Crafts	SF	0	
Wood Hobby	SF	0	
Bowling	Lanes	0	
Enlisted Club	SF	0	
Officer's Club	SF	0	
Library	SF	0	
Library	Books	0	
Theater	Seats	0	
ITT	SF	0	
Museum/Memorial	SF	0	
Pool (indoor)	Lanes	0	
Pool (outdoor)	Lanes	0	
Beach	LF	0	
Swimming Ponds	Each	0	
Tennis CT	Each	0	

*Spaces designed for a particular use. A single building might contain several facilities, each of which should be listed separately.

Features and Capabilities

F. Quality of Life (cont.)

Facility	Unit of Measure	Total	Profitable (Y,N,N/A)
Volleyball CT (outdoor)	Each	0	
Basketball CT (outdoor)	Each	0	
Racquetball CT	Each	0	
Golf Course	Holes	0	
Driving Range	Tee Boxes	0	
Gymnasium	SF	0	
Fitness Center	SF	0	
Marina	Berths	0	
Stables	Stalls	0	
Softball Fld	Each	0	
Football Fld	Each	0	
Soccer Fld	Each	0	
Youth Center	SF	0	

3. Is your library part of a regional interlibrary loan program?

N/A. NO BASE LIBRARY.



Features and Capabilities

F. Quality of Life (cont.)

4. Base Family Support Facilities and Programs

a. Complete the following table on the availability of child care in a child care center on your base.

NO ON BASE CHILD CARE

Age Category	Capacity (Children)	SF			Number on Wait List	Average Wait (Days)
		Adequate	Substandard	Inadequate		
0-6 Mos						
6-12 Mos						
12-24 Mos						
24-36 Mos						
3-5 Yrs						

b. In accordance with NAVFACINST 11010.44E, an inadequate facility cannot be made adequate for its present use through "economically justifiable means." For all the categories above where inadequate facilities are identified provide the following information:

Facility type/code:

What makes it inadequate?

What use is being made of the facility?

What is the cost to upgrade the facility to substandard?

What other use could be made of the facility and at what cost?

Current improvement plans and programmed funding:

Has this facility condition resulted in C3 or C4 designation on your BASEREP?

c. If you have a waiting list, describe what programs or facilities other than those sponsored by your command are available to accommodate those on the list.

d. How many "certified home care providers" are registered at your base?

e. Are there other military child care facilities within 30 minutes of the base? State owner and capacity (i.e., 60 children, 0-5 yrs).



Features and Capabilities

F.. Quality of Life (cont.)

f. Complete the following table for services available on your base. If you have any services not listed, include them at the bottom. NONE

Service	Unit of Measure	Qty
Exchange	SF	
Gas Station	SF	
Auto Repair	SF	
Auto Parts Store	SF	
Commissary	SF	
Mini-Mart	SF	
Package Store	SF	
Fast Food Restaurants	Each	
Bank/Credit Union	Each	
Family Service Center	SF	
Laundromat	SF	
Dry Cleaners	Each	
ARC	PN	
Chapel	PN	
FSC Classrm/Auditorium	PN	

5. Proximity of closest major metropolitan areas (provide at least three):

City	Distance (Miles)
JACKSON, MS	1
NEW ORLEANS, LA	160
BATON ROUGE, LA	150

NAVRESUBCON:RES19 19 001 2100



Features and Capabilities

C. Quality of Life (cont.)

6. Standard Rate VHA Data for Cost of Living:

Paygrade	With Dependents	Without Dependents
E1	15.69	9.77
E2	15.69	9.80
E3	6.39	4.70
E4	7.73	5.40
E5	37.88	26.44
E6	41.54	28.25
E7	45.33	31.36
E8	64.05	48.46
E9	74.74	56.72
W1	76.55	58.18
W2	36.25	28.72
W3	49.53	40.24
W4	60.90	54.00
O1E	33.02	24.50
O2E	10.88	8.67
O3E	25.93	21.94
O1	7.84	5.78
O2	17.73	6.05
O3	12.34	10.39
O4	0	0
O5	12.37	10.23
O6	0	0
O7	0	0

Features and Capabilities

F.. Quality of Life (cont.)

7. Off-base housing rental and purchase

(a) Fill in the following table for average rental costs in the area for the period 1 April 1993 through 31 March 1994.

Type Rental	Average Monthly Rent		Average Monthly Utilities Cost
	Annual High	Annual Low	
Efficiency	\$ 349.00	\$299.00	\$ 50.00
Apartment (1-2 Bedroom)	\$ 570.00	\$370.00	\$ 70.00
Apartment (3+ Bedroom)	\$ 625.00	\$475.00	\$100.00
Single Family Home (3 Bedroom)	\$ 485.00	\$450.00	\$ 65.00
Single Family Home (4+ Bedroom)	\$ 670.00	\$515.00	\$110.00
Town House (2 Bedroom)	\$ 525.00	\$495.00	\$ 90.00
Town House (3+ Bedroom)	\$1140.00	\$675.00	\$125.00
Condominium (2 Bedroom)	*	*	*
Condominium (3+ Bedroom)	*	*	*

Note:* No information was available from either Jackson MLS or the Jackson Apartment Association for these fields.

Features and Capabilities

F. Quality of Life (cont.)

(b) What was the rental occupancy rate in the community as of 31 March 1994?

Type Rental	Percent Occupancy Rate
Efficiency	95.1
Apartment (1-2 Bedroom)	94.9
Apartment (3+ Bedroom)	96.3
Single Family Home (3 Bedroom)	94.6
Single Family Home (4+ Bedroom)	95.7
Town House (2 Bedroom)	96.7
Town House (3+ Bedroom)	96.4
Condominium (2 Bedroom)	*
Condominium (3+ Bedroom)	*

Note:* No records maintained by either the Jackson MLS or the Jackson Apartment Association for this field.

(c) What are the median costs for homes in the area?

Type of Home	Median Cost
Single Family Home (3 Bedroom)	\$ 65,000
Single Family Home (4+ Bedroom)	\$112,000
Town House (2 Bedroom)	\$ 57,000
Town House (3+ Bedroom)	\$ 59,000
Condominium (2 Bedroom)	*
Condominium (3+ Bedroom)	*

* Jackson Board of Realtors does not track the information in this format.

Features and Capabilities

F. Quality of Life (cont.)

(d) For calendar year 1993, from the local MLS listings provide the number of 2, 3, and 4 bedroom homes available for purchase. Use only homes for which monthly payments would be within 90 to 110 percent of the E5 BAQ and VHA for your area.

Month	Number of Bedrooms		
	2	3	4+
January	5	25	0
February	4	27	1
March	7	20	2
April	3	37	1
May	4	47	0
June	6	50	0
July	5	42	2
August	7	44	3
September	8	41	2
October	7	43	1
November	4	36	0
December	3	33	2

Note: Above input is based on the following assumption:

	<u>RATE:</u>	<u>BAQ:</u>	<u>VHA:</u>	<u>ESTIMATED MORTGAGE:</u>
With Dependents:	E-5	415.50	37.88	\$60,000.00 and below
Without Dependents:	E-5	290.10	26.44	\$42,000.00 and below

(e) Describe the principle housing costs drivers in your local area.

Strong State government based economy has kept the prices of homes in the area steady.

Features and Capabilities

F. Quality of Life (cont.)

8. For the top five sea intensive ratings in the principle warfare community your base supports, provide the following:

Rating	Number Sea Billets in the Local Area	Number of Shore billets in the Local Area
URL - 1110	0	1
BMC	0	1
BM2	0	1

9. Complete the following table for the average one-way commute for the five largest concentrations of military and civilian personnel living off-base.

Location	% Employees	Distance (mi)	Time(min)
Jackson, MS	75	4	15
Jackson, MS - South	5	5	10
Brandon, MS	5	15	20
Ridgeland, MS	10	10	20
Crystal Springs, MS	5	30	35

Features and Capabilities

F. Quality of Life (cont.)

10. Complete the tables below to indicate the civilian educational opportunities available to service members stationed at the air station (to include any outlying fields) and their dependents:

(a) List the local educational institutions which offer programs available to dependent children. Indicate the school type (e.g. DODDS, private, public, parochial, etc.), grade level (e.g. pre-school, primary, secondary, etc.), what students with special needs the institution is equipped to handle, cost of enrollment, and for high schools only, the average SAT score of the class that graduated in 1993, and the number of students in that class who enrolled in college in the fall of 1994.

Institution	Type	Grade Level(s)	Special Education Available	Annual Enrollment t Cost per Student	1993 Avg SAT/ACT Score	% HS Grad to Higher Educ	Source of Info
Jackson School System	Public	All	Yes	\$2800.00	16.5 (ACT)	33.8%	JPS State School Superintendent's Office

Features and Capabilities



F. Quality of Life (cont.)

(b) List the educational institutions within 30 miles which offer programs off-base available to service members and their adult dependents. Indicate the extent of their programs by placing a "Yes" or "No" in all boxes as applies.

Institution	Type Classes	Program Type(s)				
		Adult High School	Vocational/ Technical	Undergraduate		Graduate
				Courses only	Degree Program	
Jackson State University	Day	Yes	Yes	Yes	Yes	Yes
	Night	Yes	Yes	Yes	Yes	Yes
MILSAPS College	Day	No	No	Yes	Yes	Yes
	Night	No	No	Yes	Yes	Yes
Mississippi College	Day	No	No	Yes	Yes	Yes
	Night	No	No	Yes	Yes	Yes
Belhaven College	Day	No	No	Yes	Yes	No
	Night	No	No	Yes	Yes	No



Features and Capabilities

F. Quality of Life (cont.)

(c) List the educational institutions which offer programs on-base available to service members and their adult dependents. Indicate the extent of their programs by placing a "Yes" or "No" in all boxes as applies.

NO ON-BASE EDUCATION

Institution	Type Classes	Program Type(s)				
		Adult High School	Vocational/ Technical	Undergraduate		Graduate
				Courses only	Degree Program	
	Day					
	Night					
	Correspondence					
	Day					
	Night					
	Correspondence					
	Day					
	Night					
	Correspondence					
	Day					
	Night					
	Correspondence					

Features and Capabilities

F. Quality of Life (cont.)

11. Spousal Employment Opportunities

Provide the following data on spousal employment opportunities.

DUE TO OUR REMOTE LOCATION (IN RELATIONSHIP TO FAMILY SERVICE CENTER MERIDIAN), NONE OF THE SPOUSES USED THE FAMILY SERVICE CENTER SPOUSE EMPLOYMENT ASSISTANCE.

Skill Level	Number of Military Spouses Serviced by Family Service Center Spouse Employment Assistance			Local Community Unemployment Rate
	1991	1992	1993	
Professional				3.76
Manufacturing				6.2
Clerical				5.1
Service				5.7
Other				

12. Do your active duty personnel have any difficulty with access to medical or dental care, in either the military or civilian health care system? Develop the why of your response.

Closest Military Health Care is in excess of 110 miles from our command. Problems are encountered using civilian health care providers in that they are unfamiliar with CHAMPUS and therefore require payment up-front.

13. Do your military dependents have any difficulty with access to medical or dental care, in either the military or civilian health care system? Develop the why of your response.

Closest Military Health Care is in excess of 110 miles from our command. Problems are encountered using civilian health care providers in that they are unfamiliar with CHAMPUS and therefore require payment up-front.

Features and Capabilities

F. Quality of Life (cont.)

14. Complete the table below to indicate the crime rate for your air station for the last three fiscal years. The source for case category definitions to be used in responding to this question are found in NCIS - Manual dated 23 February 1989, at Appendix A, entitled "Case Category Definitions." Note: the crimes reported in this table should include 1) all reported criminal activity which occurred on base regardless of whether the subject or the victim of that activity was assigned to or worked at the base; and 2) all reported criminal activity off base. N/A. Not located on a base.

Crime Definitions	FY 1991	FY 1992	FY 1993
1. Arson (6A)	0	0	0
Base Personnel - military			
Base Personnel - civilian			
Off Base Personnel - military			
Off Base Personnel - civilian			
2. Blackmarket (6C)			
Base Personnel - military			
Base Personnel - civilian			
Off Base Personnel - military			
Off Base Personnel - civilian			
3. Counterfeiting (6G)			
Base Personnel - military			
Base Personnel - civilian			
Off Base Personnel - military			
Off Base Personnel - civilian			
4. Postal (6L)			
Base Personnel - military			
Base Personnel - civilian			
Off Base Personnel - military			
Off Base Personnel - civilian			



Features and Capabilities

F. Quality of Life (cont.) N/A. Not located on a base.

Crime Definitions	FY 1991	FY 1992	FY 1993
5. Customs (6M)	Ø	Ø	Ø
Base Personnel - military			
Base Personnel - civilian			
Off Base Personnel - military			
Off Base Personnel - civilian			
6. Burglary (6N)			
Base Personnel - military			
Base Personnel - civilian			
Off Base Personnel - military			
Off Base Personnel - civilian			
7. Larceny - Ordnance (6R)			
Base Personnel - military			
Base Personnel - civilian			
Off Base Personnel - military			
Off Base Personnel - civilian			
8. Larceny - Government (6S)			
Base Personnel - military			
Base Personnel - civilian			
Off Base Personnel - military			
Off Base Personnel - civilian	∩	∩	∩



Features and Capabilities

F. Quality of Life (cont.) N/A. Not located on a base.

Crime Definitions	FY 1991	FY 1992	FY 1993
9. Larceny - Personal (6T)	∅	∅	∅
Base Personnel - military			
Base Personnel - civilian			
Off Base Personnel - military			
Off Base Personnel - civilian			
10. Wrongful Destruction (6U)			
Base Personnel - military			
Base Personnel - civilian			
Off Base Personnel - military			
Off Base Personnel - civilian			
11. Larceny - Vehicle (6V)			
Base Personnel - military			
Base Personnel - civilian			
Off Base Personnel - military			
Off Base Personnel - civilian			
12. Bomb Threat (7B)			
Base Personnel - military			
Base Personnel - civilian			
Off Base Personnel - military			
Off Base Personnel - civilian			



Features and Capabilities

F. Quality of Life (cont.) N/A. Not located on a base.

Crime Definitions	FY 1991	FY 1992	FY 1993
13. Extortion (7E)	∅	∅	∅
Base Personnel - military			
Base Personnel - civilian			
Off Base Personnel - military			
Off Base Personnel - civilian			
14. Assault (7G)			
Base Personnel - military			
Base Personnel - civilian			
Off Base Personnel - military			
Off Base Personnel - civilian			
15. Death (7H)			
Base Personnel - military			
Base Personnel - civilian			
Off Base Personnel - military			
Off Base Personnel - civilian			
16. Kidnapping (7K)			
Base Personnel - military			
Base Personnel - civilian			
Off Base Personnel - military			
Off Base Personnel - civilian			



Features and Capabilities

F. Quality of Life (cont.) N/A. Not located on a base.

Crime Definitions	FY 1991	FY 1992	FY 1993
18. Narcotics (7N)	Ø	Ø	Ø
Base Personnel - military			
Base Personnel - civilian			
Off Base Personnel - military			
Off Base Personnel - civilian			
19. Perjury (7P)			
Base Personnel - military			
Base Personnel - civilian			
Off Base Personnel - military			
Off Base Personnel - civilian			
20. Robbery (7R)			
Base Personnel - military			
Base Personnel - civilian			
Off Base Personnel - military			
Off Base Personnel - civilian			
21. Traffic Accident (7T)			
Base Personnel - military			
Base Personnel - civilian			
Off Base Personnel - military			
Off Base Personnel - civilian	✓	✓	✓



Features and Capabilities

F. Quality of Life (cont.) N/A. Not located on a base.

Crime Definitions	FY 1991	FY 1992	FY 1993
22. Sex Abuse - Child (8B)	0	0	0
Base Personnel - military			
Base Personnel - civilian			
Off Base Personnel - military			
Off Base Personnel - civilian			
23. Indecent Assault (8D)			
Base Personnel - military			
Base Personnel - civilian			
Off Base Personnel - military			
Off Base Personnel - civilian			
24. Rape (8F)			
Base Personnel - military			
Base Personnel - civilian			
Off Base Personnel - military			
Off Base Personnel - civilian			
25. Sodomy (8G)			
Base Personnel - military			
Base Personnel - civilian			
Off Base Personnel - military			
Off Base Personnel - civilian			

Data Call 49

Activity: NRC JACKSON, MS

I certify that the information contained herein is accurate and complete to the best of my knowledge and belief.

DEPUTY CHIEF OF NAVAL OPERATIONS (LOGISTICS)
DEPUTY CHIEF OF STAFF (INSTALLATIONS & LOGISTICS)

J. B. GREENE, JR.
Name

ACTING
Title


Signature
13 JUL 1994
Date

I certify that the information contained herein is accurate and complete to the best of my knowledge and belief.

NEXT ECHELON LEVEL (if applicable)

F. E. CURRAN, CAPT, USNR
NAME (Please type or print)

F. E. Curran
Signature

COMMANDER - ACTING
Title

20 JUN 94
Date

NAVRESREDCOM REG TEN, NEW ORLEANS
Activity

I certify that the information contained herein is accurate and complete to the best of my knowledge and belief.

NEXT ECHELON LEVEL (if applicable)

J. W. FITZGERALD, CAPT, USNR
NAME (Please type or print)

J. W. Fitzgerald
Signature

COMMANDER - ACTING
Title

28 JUN 1994
Date

COMNAVSURFRESFOR
Activity

I certify that the information contained herein is accurate and complete to the best of my knowledge and belief.

MAJOR CLAIMANT LEVEL

T. F. HALL, RADM, USN
NAME (Please type or print)

T. F. Hall
Signature

COMMANDER
Title

7/5/94
Date

COMNAVRESFOR
Activity



BRAC-95 CERTIFICATION

Reference: SECNAVNOTE 11000 of 08 December 1993

In accordance with policy set forth by the Secretary of the Navy, personnel of the Department of the Navy, uniformed and civilian, who provide information for use in the BRAC-95 process are required to provide a signed certification that states "I certify that the information contained herein is accurate and complete to the best of my knowledge and belief." The signing of this certification constitutes a representation that the certifying official has reviewed the information and either (1) personally vouches for its accuracy and completeness or (2) has possession of, and is relying upon, a certification executed by a competent subordinate.

Each individual in your activity generating information for the BRAC-95 process must certify that information. Enclosure (1) is provided for individual certifications and may be duplicated as necessary. You are directed to maintain those certifications at your activity for audit purposes. For purposes of this certification sheet, the commander of the activity will begin the certification process and each reporting senior in the Chain of Command reviewing the information will also sign this certification sheet. This sheet must remain attached to this package and be forwarded up the Chain of Command. Copies must be retained by each level in the Chain of Command for audit purposes.

I certify that the information contained herein is accurate and complete to the best of my knowledge and belief.

ACTIVITY COMMANDER

JOHN A. SLAY
NAME (Please type or print)

John A. Slay
Signature

COMMANDING OFFICER
Title

16 JUN 94
Date

NAVAL RESERVE CENTER, JACKSON MS
Activity



DATA CALL 66
INSTALLATION RESOURCES

680

Activity Information:

Activity Name:	NRC JACKSON, MS
UIC:	61955
Host Activity Name (if response is for a tenant activity):	
Host Activity UIC:	

General Instructions/Background. A separate response to this data call must be completed for each Department of the Navy (DON) host, independent and tenant activity which separately budgets BOS costs (regardless of appropriation), and, is located in the United States, its territories or possessions.

1. Base Operating Support (BOS) Cost Data. Data is required which captures the total annual cost of operating and maintaining Department of the Navy (DON) shore installations. Information must reflect FY 1996 budget data supporting the FY 1996 NAVCOMPT Budget Submit. Two tables are provided. Table 1A identifies "Other than DBOF Overhead" BOS costs and Table 1B identifies "DBOF Overhead" BOS costs. These tables must be completed, as appropriate, for all DON host, independent or tenant activities which separately budget BOS costs (regardless of appropriation), and, are located in the United States, its territories or possessions. Responses for DBOF activities may need to include both Table 1A and 1B to ensure that all BOS costs, including those incurred by the activity in support of tenants, are identified. If both table 1A and 1B are submitted for a single DON activity, please ensure that no data is double counted (that is, included on both Table 1A and 1B). The following tables are designed to collect all BOS costs currently budgeted, regardless of appropriation, e.g., Operations and Maintenance, Research and Development, Military Personnel, etc. Data must reflect FY 1996 and should be reported in thousands of dollars.

a. Table 1A - Base Operating Support Costs (Other Than DBOF Overhead). This Table should be completed to identify "Other Than DBOF Overhead" Costs. Display, in the format shown on the table, the O&M, R&D and MPN resources currently budgeted for BOS services. O&M cost data must be consistent with data provided on the BS-1 exhibit. Report only direct funding for the activity. Host activities should not include reimbursable support provided to tenants, since tenants will be separately reporting these costs. Military personnel costs should be included on the appropriate lines of the table. Please ensure that individual lines of the table do not include duplicate costs. Add additional

**DATA CALL 66
INSTALLATION RESOURCES**

lines to the table (following line 2j., as necessary, to identify any additional cost elements not currently shown). Leave shaded areas of table blank.

Table 1A - Base Operating Support Costs (Other Than DBOF Overhead)			
Activity Name: NRC JACKSON, MS		UIC: 61955	
Category	FY 1996 BOS Costs (\$000)		
	Non-Labor	Labor	Total
1. Real Property Maintenance Costs:			
1a. Maintenance and Repair	6		6
1b. Minor Construction			
1c. Sub-total 1a. and 1b.	6		6
2. Other Base Operating Support Costs:			
2a. Utilities	13		13
2b. Transportation			
2c. Environmental			
2d. Facility Leases			
2e. Morale, Welfare & Recreation			
2f. Bachelor Quarters	5		5
2g. Child Care Centers			
2h. Family Service Centers			
2i. Administration	29		29
2j. Other (Specify) - Basecomm	7		7
2k. Sub-total 2a. through 2j:	54		54
3. Grand Total (sum of 1c. and 2k.):	60		60

**DATA CALL 66
INSTALLATION RESOURCES**

b. Funding Source. If data shown on Table 1A reflects more than one appropriation, then please provide a break out of the total shown for the "3. Grand-Total" line, by appropriation:

<u>Appropriation</u>	<u>Amount (\$000)</u>
----------------------	-----------------------

N/A	
-----	--

c. Table 1B - Base Operating Support Costs (DBOF Overhead). This Table should be submitted for all current DBOF activities. Costs reported should reflect BOS costs supporting the DBOF activity itself (usually included in the G&A cost of the activity). For DBOF activities which are tenants on another installation, total cost of BOS incurred by the tenant activity for itself should be shown on this table. It is recognized that differences exist among DBOF activity groups regarding the costing of base operating support: some groups reflect all such costs only in general and administrative (G&A), while others spread them between G&A and production overhead. Regardless of the costing process, all such costs should be included on Table 1B. The Minor Construction portion of the FY 1996 capital budget should be included on the appropriate line. Military personnel costs (at civilian equivalency rates) should also be included on the appropriate lines of the table. Please ensure that individual lines of the table do not include duplicate costs. Also ensure that there is no duplication between data provided on Table 1A. and 1B. These two tables must be mutually exclusive, since in those cases where both tables are submitted for an activity, the two tables will be added together to estimate total BOS costs at the activity. Add additional lines to the table (following line 21., as necessary, to identify any additional cost elements not currently shown). Leave shaded areas of table blank.

Other Notes: All costs of operating the five Major Range Test Facility Bases at DBOF activities (even if direct RDT&E funded) should be included on Table 1B. Weapon Stations should include underutilized plant capacity costs as a DBOF overhead "BOS expense" on Table 1B.. N/A

**DATA CALL 66
INSTALLATION RESOURCES**

N/A

Table 1B - Base Operating Support Costs (DBOF Overhead)			
Activity Name: NRC JACKSON, MS		UIC: 61955	
Category	FY 1996 Net Cost From UC/FUND-4 (\$000)		
	Non-Labor	Labor	Total
1. Real Property Maintenance Costs:			
1a. Real Property Maintenance (> \$15K)			
1b. Real Property Maintenance (< \$15K)			
1c. Minor Construction (Expensed)			
1d. Minor Construction (Capital Budget)			
1c. Sub-total 1a. through 1d.			
2. Other Base Operating Support Costs:			
2a. Command Office			
2b. ADP Support			
2c. Equipment Maintenance			
2d. Civilian Personnel Services			
2e. Accounting/Finance			
2f. Utilities			
2g. Environmental Compliance			
2h. Police and Fire			
2i. Safety			
2j. Supply and Storage Operations			
2k. Major Range Test Facility Base Costs			
2l. Other (Specify)			
2m. Sub-total 2a. through 2l:			
3. Depreciation			
4. Grand Total (sum of 1c., 2m., and 3.) :			

**DATA CALL 66
INSTALLATION RESOURCES**

2. Services/Supplies Cost Data. The purpose of Table 2 is to provide information about projected FY 1996 costs for the purchase of services and supplies by the activity. (Note: Unlike Question 1 and Tables 1A and 1B, above, this question is not limited to overhead costs.) The source for this information, where possible, should be either the NAVCOMPT OP-32 Budget Exhibit for O&M activities or the NAVCOMPT UC/FUND-1/IF-4 exhibit for DBOF activities. Information must reflect FY 1996 budget data supporting the FY 1996 NAVCOMPT Budget Submit. Break out cost data by the major sub-headings identified on the OP-32 or UC/FUND-1/IF-4 exhibit, disregarding the sub-headings on the exhibit which apply to civilian and military salary costs and depreciation. Please note that while the OP-32 exhibit aggregates information by budget activity, this data call requests OP-32 data for the activity responding to the data call. Refer to NAVCOMPTINST 7102.2B of 23 April 1990, Subj: Guidance for the Preparation, Submission and Review of the Department of the Navy (DON) Budget Estimates (DON Budget Guidance Manual) with Changes 1 and 2 for more information on categories of costs identified. Any rows that do not apply to your activity may be left blank. However, totals reported should reflect all costs, exclusive of salary and depreciation.

Table 2 - Services/Supplies Cost Data	
Activity Name: NRC JACKSON, MS	UIC: 61955
Cost Category	FY 1996 Projected Costs (\$000)
Travel:	3
Material and Supplies (including equipment):	6
Industrial Fund Purchases (other DBOF purchases):	5
Transportation:	
Other Purchases (Contract support, etc.):	46
Total:	60

**DATA CALL 66
INSTALLATION RESOURCES**

3. Contractor Workyears.

a. On-Base Contract Workyear Table. Provide a projected estimate of the number of contract workyears expected to be performed "on base" in support of the installation during FY 1996. Information should represent an annual estimate on a full-time equivalency basis. Several categories of contract support have been identified in the table below. While some of the categories are self-explanatory, please note that the category "mission support" entails management support, labor service and other mission support contracting efforts, e.g., aircraft maintenance, RDT&E support, technical services in support of aircraft and ships, etc.

Table 3 - Contract Workyears	
Activity Name: NRC JACKSON, MS	UIC: 61955
Contract Type	FY 1996 Estimated Number of Workyears On-Base
Construction:	
Facilities Support:	
Mission Support:	.7
Procurement:	
Other:*	
Total Workyears:	.7

* **Note:** Provide a brief narrative description of the type(s) of contracts, if any, included under the "Other" category.

**DATA CALL 66
INSTALLATION RESOURCES**

b. Potential Disposition of On-Base Contract Workyears. If the mission/functions of your activity were relocated to another site, what would be the anticipated disposition of the on-base contract workyears identified in Table 3.?

1) Estimated number of contract workyears which would be transferred to the receiving site (This number should reflect the number of jobs which would in the future be contracted for at the receiving site, not an estimate of the number of people who would move or an indication that work would necessarily be done by the same contractor(s)): .7

2) Estimated number of workyears which would be eliminated: 0

3) Estimated number of contract workyears which would remain in place (i.e., contract would remain in place in current location even if activity were relocated outside of the local area): 0

**DATA CALL 66
INSTALLATION RESOURCES**

c. **"Off-Base" Contract Workyear Data.** Are there any contract workyears located in the local community, but not on-base, which would either be eliminated or relocated if your activity were to be closed or relocated? If so, then provide the following information (ensure that numbers reported below do not double count numbers included in 3.a. and 3.b., above):

No. of Additional Contract Workyears Which Would Be Eliminated	General Type of Work Performed on Contract (e.g., engineering support, technical services, etc.)
0	

No. of Additional Contract Workyears Which Would Be Relocated	General Type of Work Performed on Contract (e.g., engineering support, technical services, etc.)
0	

I certify that the information contained herein is accurate and complete to the best of my knowledge and belief.
NEXT ECHELON LEVEL (if applicable)

NAME (Please type or print)

Signature

Title

Date

Activity

I certify that the information contained herein is accurate and complete to the best of my knowledge and belief.
NEXT ECHELON LEVEL (if applicable)

NAME (Please type or print)

Signature

Title

Date

Activity

I certify that the information contained herein is accurate and complete to the best of my knowledge and belief.
MAJOR CLAIMANT LEVEL

T. F. HALL, RADM, USN

NAME (Please type or print)

Signature

COMMANDER NAVAL RESERVE FORCE

Title

Date

COMNAVRESFOR, WASHINGTON, D.C.
Activity

T.F. Hall

7/14/94

I certify that the information contained herein is accurate and complete to the best of my knowledge and belief.
DEPUTY CHIEF OF NAVAL OPERATIONS (LOGISTICS)
DEPUTY CHIEF OF STAFF (INSTALLATIONS & LOGISTICS)

NAME (Please type or print)

Signature

Title

Date

BRAC-95 CERTIFICATION

I certify that the information contained herein is accurate and complete to the best of my knowledge and belief.

P. M. NIGH

NAME (Please type or print)

DEPUTY CHIEF OF STAFF

Title

CODE 06

Division

FINANCIAL MANAGEMENT

Department

COMMANDER NAVAL RESERVE FORCE

Activity

P.M. Nigh

Signature

7/13/94

Date

I certify that the information contained herein is accurate and complete to the best of my knowledge and belief.
NEXT ECHELON LEVEL (if applicable)

NAME (Please type or print)

Signature

Title

Date

Activity

I certify that the information contained herein is accurate and complete to the best of my knowledge and belief.
NEXT ECHELON LEVEL (if applicable)

NAME (Please type or print)

Signature

Title

Date

Activity

I certify that the information contained herein is accurate and complete to the best of my knowledge and belief.
MAJOR CLAIMANT LEVEL

T. F. HALL, RADM, USN

NAME (Please type or print)

Signature

COMMANDER NAVAL RESERVE FORCE

Title

Date

COMNAVRESFOR, WASHINGTON, D.C.

Activity

I certify that the information contained herein is accurate and complete to the best of my knowledge and belief.
DEPUTY CHIEF OF NAVAL OPERATIONS (LOGISTICS)
DEPUTY CHIEF OF STAFF (INSTALLATIONS & LOGISTICS)

W. A. EARNER

NAME (Please type or print)

Signature

Title

Date

681

**CAPACITY ANALYSIS:
DATA CALL WORK SHEET FOR
RESERVE CENTER: La Crosse, Wisconsin
ACTIVITY UIC: 62066**

Category Personnel Support
Sub-category Reserve Centers
Types Naval and Marine Corps Reserve Centers and Facilities

ORIGINAL

*****If any responses are classified, attach separate classified annex*****

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MISSION REQUIREMENTS:

A. AUTHORIZED/DIRECTED DRILL UTILIZATION

1. For all units (Department of the Navy and non-Department of the Navy) that train at your command/center give, by type of training facility (drill space), the number of facility hours of training that was conducted in FY 1992 and FY 1993, and the number of facility hours that will be required to meet future Authorized/Directed Drill Utilization. A facility hour is equal to the number of facilities uses times the number of weekend hours per year the facility was occupied. For example, if a Reserve Center conducts training in 3 classrooms, 50 weekends a year for 16 hours, the classroom hours would be $3 \times 16 \times 50 = 2,400$ classroom hours worth of training. Designate "other" by 171-15 type or other DCN.

TYPE OF FACILITY	HISTORIC Training Hours per year						PROJECTED Training Hours per year	
	1992	1993	1994	1995	1997	1999	2001	
Classrooms	2576	2576	2576	2252	2252	2252	2252	
Assembly Hall	40	40	40	40	40	40	40	
Conference/Classroom	60	60	60	60	60	60	60	
Multi-Media Center	320	320	320	320	320	320	320	
Team Training	0	0	0	0	0	0	0	
Army	0	0	0	0	0	0	0	
Other (designate)	0	0	0	0	0	0	0	

Duplicate all charts as necessary.

UIC: 62066
LA CROSSE

Throughput. For each type of drill space utilization in response to question 1, Give the annual student throughput, (i.e. number of reservists utilizing the type of facility (drill space) or the expected throughput, for the fiscal years indicated.

TYPE OF FACILITY	Historic Throughput		PROJECTED THROUGHPUT (Fiscal Year)				
	1992	1993	1994	1995	1997	1999	2001
Classrooms	267	218	208	167	167	167	167
Assembly Hall	267	218	208	167	167	167	167
Conference/Classroom	42	36	23	19	19	19	19
Multi-Media Center	200	180	160	120	120	120	120
Team Training	0	0	0	0	0	0	0
Shops	100	80	70	40	40	40	40
Armory	0	0	0	0	0	0	0
Other (designate)	0	0	0	0	0	0	0

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2. Throughput. For each type of drill space utilization in response to question 1, Give the annual student throughput, (i.e. number of reservists utilizing the type of facility (drill space) or the expected throughput, for the fiscal years indicated.

TYPE OF FACILITY	Historic Throughput		PROJECTED THROUGHPUT (Fiscal Year)				
	1992	1993	1994	1995	1997	1999	2001
Classrooms							
Assembly Hall	267	218	208	167	167	167	167
Conference/Classroom	267	218	208	167	167	167	167
Multi-Media Center	200	180	160	120	120	120	120
Team Training	0	0	0	0	0	0	0
Shops	100	80	70	40	40	40	40
Armory	0	0	0	0	0	0	0
Other (designate)	0	0	0	0	0	0	0

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3. By Category, list the Actual Manning Level and Authorized Navy Reserve Billets historically and projected for the year indicated.

CATEGORY	NUMBER OF SERRES	FY 1992		FY 1993		FY 1994		FY 1995		FY 1997		FY 1999		FY 2001	
		ACTUAL MANNING LEVEL	AUTHORIZED BILLETS	ACTUAL MANNING LEVEL	AUTHORIZED BILLETS	ACTUAL MANNING LEVEL	AUTHORIZED BILLETS	ACTUAL MANNING LEVEL	AUTHORIZED BILLETS	ACTUAL MANNING LEVEL	AUTHORIZED BILLETS	ACTUAL MANNING LEVEL	AUTHORIZED BILLETS	ACTUAL MANNING LEVEL	AUTHORIZED BILLETS
		*270 267	219 216	*231 218	228	*209 206	202 205	208 195	203 152	*208 159	208 152	*208 199	202 152	*208 195	202 152
	NUMBER OF TARS	8	8	9	9	8	8	8	8	8	8	8	8	8	8
		9	7	9	7	9	8	9	8	7	8	7	8	7	8
		1	2	2 21	1	1	1	1	1	1	1	1	1	1	1
		1	2	2	1	1	1	1	1	1	1	1	1	1	1

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4. By Category, list the Actual Manning Level and Authorized Marine Corps Billets historically and projected for the year indicated.

UIC: 62066

CATEGORY		FY 1992	FY 1993	FY 1994	FY 1995	FY 1997	FY 1999	FY 2001
NUMBER OF USMCR	ACTUAL MANNING LEVEL							
	AUTHORIZED BILLETS							
NUMBER OF FTS	ACTUAL MANNING LEVEL							
	AUTHORIZED BILLETS							
USMC	ACTUAL MANNING LEVEL							
	AUTHORIZED BILLETS							

NO MARINE CORPS BILLETS ASSIGNED

6. Authorized/Directed Drill Utilization Areas. Provide any land and water area requirements for reserve Authorized/Directed Drill Utilization conducted by your Reserve Command/Center; include landing zones (LZs), gun firing positions (GPs), etc. that are scheduled individually, and impact areas. List utilized areas for each use.

Training Area(s)	Type of Training	Hours per fiscal year
NONE: NO AREAS AT CENTER.		

b.

UIC: 62066

MARINE CORPS UNITS	BILLETS AUTHORIZED / ACTUAL MANNING									
	FY 1993		FY 1995		FY 1997		FY 1999		FY 2001	
	BILLETS	MAN- NING	BILLETS	MAN- NING	BILLETS	MAN- NING	BILLETS	MAN- NING	BILLETS	MAN- NING

Duplicate this chart as necessary to list all units.

NO MARINE CORPS UNITS

d.

COAST GUARD UNITS	BILLETS AUTHORIZED / ACTUAL MANNING									
	FY 1993		FY 1995		FY 1997		FY 1999		FY 2001	
	BILLETS	MAN- NING	BILLETS	MAN- NING	BILLETS	MAN- NING	BILLETS	MAN- NING	BILLETS	MAN- NING

Duplicate this chart as necessary to list all units.

NO COAST GUARD UNITS ASSIGNED

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TO

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UIC: 62066

TO

06/14/1994 14:17 FROM

AIR NATIONAL GUARD UNITS	BILLETS AUTHORIZED / ACTUAL MANNING									
	FY 1993		FY 1995		FY 1997		FY 1999		FY 2001	
	BILLETS	MAN- NING	BILLETS	MAN- NING	BILLETS	MAN- NING	BILLETS	MAN- NING	BILLETS	MAN- NING

Duplicate this chart as necessary to list all units.

NO AIR NATIONAL GUARD UNITS ATTACHED

g.

JOINT UNITS	BILLETS AUTHORIZED / ACTUAL MANNING									
	FY 1993		FY 1995		FY 1997		FY 1999		FY 2001	
	BILLETS	MAN-NING	BILLETS	MAN-NING	BILLETS	MAN-NING	BILLETS	MAN-NING	BILLETS	MAN-NING

Duplicate this chart as necessary to list all units.

NO JOINT UNITS ASSIGNED

8. List all other users that trained at your Reserve Command/Center facilities on drill weekends.

User	NUMBER OF PERSONNEL PARTICIPATING							
	FY 1992	FY 1993	FY 1994	FY 1995	FY 1997	FY 1999	FY 2001	
	NO OTHER RESERVE COMMANDS DRILL AT THIS CENTER							

9. What is the average number of weekends per month that the Reserve Center is conducting training?

2

FACILITIES

A. Facilities (Drill Space)

1. Complete the following tables for all of the drill spaces at your Reserve Center. The types of facilities (drill spaces) in the succeeding tables should correspond with that used to identify facility requirements / usage in the Mission Requirements Section of this Data Call. Reproduce the tables as necessary to include all facilities in which training occurs. **Do not include any inadequate facilities. 16 hours per week availability is presumed for all facilities;** in the "Non-Availability" column indicate when the facility cannot be scheduled; and in the "Normally Scheduled for Use" column provide facility usage based on the normal work schedule in force.

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2. CCN: 171-15 (Reserve Building). For each general type of facility (drill space), list individually and identify all others designed to support a particular type of Authorized/Directed Drill Utilization. (Non-Availability Weekend Drill Days are the number of regularly scheduled drill days for which the particular drill space could not be utilized for any reason.
 CCN: 171-15 (A or B)

Type of Authorized/Directed Drill Utilization Facility (drill space)	Number of Facility (drill space) Type	Unique to the Reserve Command/ Center (Y/N)	Non-Availability Weekend Drill Days per year (FY 1993)	Normally Scheduled per drill weekend (FY 1993)	
				Average Utilization (hrs/day)	Average Utilization (hours/yr)
Classrooms:	14	N	0	4.6	2576
Assembly Hall	1	N	0	1	40
Conference/Classroom	1	N	0	1.5	60
Multi-Media Center	1	N	0	8	320
Team Training	0	N	0	0	0
Shops	2	N	0	0	0
Armory	0	N	0	0	0
Other (designate)	0	N	0	0	0

3. Complete the following table in square feet used, or expected to be used, in each category: The total should equal the square footage of your Reserve Center.

TYPE OF FACILITY (drill space)	Current Allocation	FY 1995	FY 1996	FY 1997	FY 1998	FY 1999	FY 2000	FY 2001
ADMINISTRATION	3,012	3,012	3,012	3,012	3,012	3,012	3,012	3,012
CLASSROOMS	6,994	6,994	6,994	6,994	6,994	6,994	6,994	6,994
TRAINERS	N/A				NONE ON BOARD	NONE ON BOARD		
LABS	N/A				NONE ON BOARD	NONE ON BOARD		
SHOPS	2,016	2,016	2,016	2,016	2,016	2,016	2,016	2,016
VEHICLE MAINTENANCE BAYS	N/A				NONE ON BOARD	NONE ON BOARD		
STORAGE	2,585	2,585	2,585	2,585	2,585	2,585	2,585	2,585
SUPPLY	238	238	238	238	238	238	238	238
Armory	N/A				NO ARMORY			
OTHER	NONE							
OTHER CCNS*	NONE							
TOTAL SQ. FT.	14,845	14,845	14,845	14,845	14,845	14,845	14,845	14,845

Other CCNs owned and operated by the Reserve Center (i.e. 171-35 Operational Trainer Facility, or 171-50 Small Arms Range - Indoor) where training occurs.

4. What major factors preclude full utilization of drill spaces and classroom spaces, e.g., scheduling inefficiencies for classroom, reservist/instructor ratio, availability of instructors, etc.? Historically, what percentage of drill space is vacant because of these factors?

NO MAJOR FACTORS, 0 PERCENT

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B. Authorized/Directed Utilization Areas. List all of the Reserve Command/Center land and water utilization areas; include landing zones (LZ)s, gun firing positions (GP)s, etc. that are scheduled individually, and impact areas.

Utilization Areas	Size (Acres)	Number of Personnel involved per event	Non-Availability (FY 1993) (days per year)
N/A	NONE AT NRC LA CROSSE		

1. Airspace. List any airspace used by your Reserve Command/Center.

Airspace Name	Dimensions	Scheduling Agency	Controlling Agency
N/A	NO AIRSPACE USED NRC LA CROSSE		

2. Airfields. List any airfields used by your Reserve Command/Center.

Airfield	Location	Ownership (Service/non-DoD)
N/A	NO AIRFIELDS AT NRC LA CROSSE	

Features and Capabilities

A. Expansion

1. Assuming that your Reserve Command/Center is not constrained by operational funding (i.e. personnel support, increased overhead costs, etc.) with the present physical plant, facilities etc., how many additional reservists could be assigned to your Command/Center?

THIS CENTER COULD POTENTIALLY SUPPORT UP TO 1,400 SERIES ON A 4 DRILL WEEKEND SCHEDULE, 350 SERIES MAX PER WEEKEND.

2. Describe any investment you see that could significantly increase your capacity to accomplish the Authorized/Directed Drill Utilization missions; include costs, and indicate what additional capacity, in terms of utilization hours per drill period and utilization days per fiscal year.

THE CENTER'S MACHINE SHOP, WHICH RECEIVES LIMITED USE, COULD BE SUBDIVIDED TO MAKE A SMALLER SHOP PLUS TWO 60 MAN CLASSROOMS. SHORT RESPONSE TIME PREVENTS DETAILED COST FIGURES BUT ESTIMATE JOB COULD BE DONE UNDER \$10,000.

3. List and explain the limiting factors that further funding for personnel, equipment, MILCON, etc. cannot overcome (e.g., environmental restrictions, land areas, scheduling conflicts).

ONLY LIMITING FACTOR FOR NRC IA CROSSE IS THE 1.7 ACERS OF LAND OCCUPIED. NO ROOM FOR EXPANSION EXISTS AS SURROUNDING LAND IS OCCUPIED BY RESIDENCES.

I certify that the information contained herein is accurate and complete to the best of my knowledge and belief.

DEPUTY CHIEF OF NAVAL OPERATIONS (LOGISTICS
DEPUTY CHIEF OF STAFF (INSTALLATIONS & LOGISTICS)

NAME (Please type or print)

Signature

Title

Date



Data Call 48

Activity: *NRC La Crosse, WI*

I certify that the information contained herein is accurate and complete to the best of my knowledge and belief.

DEPUTY CHIEF OF NAVAL OPERATIONS (LOGISTICS)
DEPUTY CHIEF OF STAFF (INSTALLATIONS & LOGISTICS)

J. B. GREENE, JR.

Name

ACTING

Title


Signature

15 JUL 1994

Date

BRAC-95 CERTIFICATION

Reference: SECNAVNOTE 11000 of 08 December 1993

In accordance with policy set forth by the Secretary of the Navy, personnel of the Department of the Navy, uniformed and civilian, who provide information for use in the BRAC-95 process are required to provide a signed certification that states "I certify that the information contained herein is accurate and complete to the best of my knowledge and belief." The signing of this certification constitutes a representation that the certifying official has reviewed the information and either (1) personally vouches for its accuracy and completeness or (2) has possession of, and is relying upon, a certification executed by a competent subordinate.

Each individual in your activity generating information for the BRAC-95 process must certify that information. Enclosure (1) is provided for individual certifications and may be duplicated as necessary. You are directed to maintain those certifications at your activity for audit purposes. For purposes of this certification sheet, the commander of the activity will begin the certification process and each reporting senior in the Chain of Command reviewing the information will also sign this certification sheet. This sheet must remain attached to this package and be forwarded up the Chain of Command. Copies must be retained by each level in the Chain of Command for audit purposes.

I certify that the information contained herein is accurate and complete to the best of my knowledge and belief.

ACTIVITY COMMANDER

WILKIE, JAMES., LCDR
NAME (Please type or print)
COMMANDING OFFICER
Title
NRC LA CROSSE, WI
Activity

James E. Wilkie
Signature

16 June 1994
Date



I certify that the information contained herein is accurate and complete to the best of my knowledge and belief.

NEXT ECHELON LEVEL (if applicable)

S. D. BARRETT, CAPT, USNR
NAME (Please type or print)


Signature

COMMANDER
Title

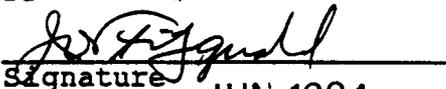
22 JUNE 94
Date

COMNAVRESREDCOM REG 16
Activity

I certify that the information contained herein is accurate and complete to the best of my knowledge and belief.

NEXT ECHELON LEVEL (if applicable)

J. W. FITZGERALD, CAPT, USNR
NAME (Please type or print)


Signature

COMMANDER (ACTING)
Title

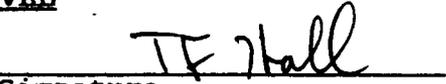
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Date

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Activity

I certify that the information contained herein is accurate and complete to the best of my knowledge and belief.

MAJOR CLAIMANT LEVEL

T. F. HALL, RADM, USN
NAME (Please type or print)


Signature

COMMANDER
Title

7/5/94
Date

COMNAVRESFOR
Activity

Dt Call 78

62066

BRAC-95 CERTIFICATION

Reference: SECNAVNOTE 11000 of 08 December 1993

In accordance with policy set forth by the Secretary of the Navy, personnel of the Department of the Navy, uniformed and civilian, who provide information for use in the BRAC-95 process are required to provide a signed certification that states "I certify that the information contained herein is accurate and complete to the best of my knowledge and belief." The signing of this certification constitutes a representation that the certifying official has reviewed the information and either (1) personally vouches for its accuracy and completeness or (2) has possession of, and is relying upon, a certification executed by a competent subordinate.

Each individual in your activity generating information for the BRAC-95 process must certify that information. Enclosure (1) is provided for individual certifications and may be duplicated as necessary. You are directed to maintain those certifications at your activity for audit purposes. For purposes of this certification sheet, the commander of the activity will begin the certification process and each reporting senior in the Chain of Command reviewing the information will also sign this certification sheet. This sheet must remain attached to this package and be forwarded up the Chain of Command. Copies must be retained by each level in the Chain of Command for audit purposes.

I certify that the information contained herein is accurate and complete to the best of my knowledge and belief.

ACTIVITY COMMANDER

J. E. WILKIE, LCDR, USNR

NAME (Please type or print)

COMMANDING OFFICER

Title

NRC LA CROSSE, WI

Activity

J. E. Wilkie
Signature

3 August 1994

Date



Data Call 4B

62066

I certify that the information contained herein is accurate and complete to the best of my knowledge and belief.

NEXT ECHELON LEVEL (if applicable)

S. D. BARRETT, CAPT, USNR

NAME

[Signature]
Signature

COMMANDER

Title

11 AUG 94

Date

NAVRESREDCOM REG SIXTEEN

Activity

I certify that the information contained herein is accurate and complete to the best of my knowledge and belief.

NEXT ECHELON LEVEL (if applicable)

R. R. BUCLEY, CAPT, USNR

NAME (please print or type)

[Signature]
Signature

COMMANDER - ACTING

Title

8/29/94
Date

COMNAVSURFRESFOR

Activity

I certify that the information contained herein is accurate and complete to the best of my knowledge and belief.

MAJOR CLAIMANT LEVEL

NAME (please print or type)

Commander, Naval Reserve Force

Title 4400 Dauphine St.

New Orleans, LA 70146

Activity

[Signature]
Signature T. F. HALL

13 SEP 1994

Date Chief of Naval Operations (N095)
2000 Navy Pentagon
Washington, DC 20350-2000

I certify that the information contained herein is accurate and complete to the best of my knowledge and belief.

DEPUTY CHIEF OF NAVAL OPERATIONS (LOGISTICS)
DEPUTY CHIEF OF STAFF (INSTALLATIONS & LOGISTICS)

NAME (please print or type)

Title

Signature

Date

Document Separator

DATA CALL 63 FAMILY HOUSING DATA

681

Information on Family Housing is required for use in BRAC-95 return on investment calculations.

Installation Name:	NRC La Crosse
Unit Identification Code (UIC):	N62066
Major Claimant:	COMNAVRESFOR

Percentage Of Military Families Living on-Base:	0
Number of Vacant Officer Housing Units:	0
Number of Vacant Enlisted Housing Units:	0
Fy 1996 Family Housing Budget (\$000):	0
Total Number of Officer Housing Units:	0
Total Number of Enlisted Housing Units:	0

No housing or budget data associated with this UIC available.

Note: All data should reflect figures as of the beginning of FY 1996. If major DON installations share a family housing complex, figures should reflect an estimate of the installation's prorated share of the family housing complex.

I certify that the information contained herein is accurate and complete to the best of my knowledge and belief.

MAJOR CLAIMANT LEVEL

J. E. BUFFINGTON, RADM, CEC, USN
NAME (Please type or print)

COMMANDER
Title

NAVAL FACILITIES ENGINEERING COMMAND
Activity


Signature
7/20/94
Date

I certify that the information contained herein is accurate and complete to the best of my knowledge and belief.

DEPUTY CHIEF OF NAVAL OPERATIONS (LOGISTICS)
DEPUTY CHIEF OF STAFF (INSTALLATIONS & LOGISTICS)

W. A. EARNER
NAME (Please type or print)

Title


Signature
7/25/94
Date

BRAC-95 CERTIFICATION

Reference: SECNAV NOTE 11000 dtd 8 Dec 93

In accordance with policy set forth by the Secretary of the Navy, personnel of the Department of the Navy, uniformed and civilian, who provide information for use in the BRAC-95 process are required to provide a signed certification that states "I certify that the information contained herein is accurate and complete to the best of my knowledge and belief."

The signing of this certification constitutes a representation that the certifying official has reviewed the information and either (1) personally vouches for its accuracy and completeness or (2) has possession of, and is relying upon, a certification executed by a competent subordinate.

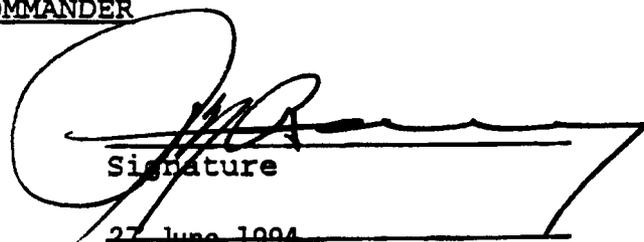
Each individual in your activity generating information for the BRAC-95 process must certify that information. Enclosure (1) is provided for individual certifications and may be duplicated as necessary. You are directed to maintain those certifications at your activity for audit purposes. For purposes of this certification sheet, the commander of the activity will begin the certification process and each reporting senior in the Chain of Command reviewing the information will also sign this certification sheet. This sheet must remain attached to this package and be forwarded up the Chain of Command. Copies must be retained by each level in the Chain of Command for audit purposes.

I certify the information contained herein is accurate and complete to the best of my knowledge and belief.

ACTIVITY COMMANDER

J. R. REVER
NAME (Please type of print)
CAPT. CEC, USN
COMMANDING OFFICER
Title

SOUTHNAVFACENGCOM
Activity


Signature
27 June 1994
Date

Enclosure (1)

Document Separator

Activity: 62066

DATA CALL 1: GENERAL INSTALLATION INFORMATION

1. ACTIVITY: Follow example as provided in the table below (delete the examples when providing your input). If any of the questions have multiple responses, please provide all. If any of the information requested is subject to change between now and the end of Fiscal Year (FY) 1995 due to known redesignations, realignments/closures or other action, provide current and projected data and so annotate.

* Name
Official name Naval Reserve Center,
La Crosse, WI
Acronym(s) used in
correspondence NAVRESCEN La Crosse, WI
Commonly accepted short title NRC La Crosse, WI
* Complete mailing address Commanding Officer
Naval Reserve Center
2226 Green Bay Street
La Crosse, WI 54601-5916

* PLAD: NAVRESCEN LA CROSSE WI

* PRIMARY UIC: 62066 (Plant Account UIC for Plant Account Holders) Enter this number as the Activity identifier at the top of each Data Call response page.

1. ALL OTHER UIC(s): N/A Purpose: NO OTHER UICs

2. PLANT ACCOUNT HOLDER:

* Yes X No ___ check one)

Data Call 1: General Installation Information, continued

3. ACTIVITY TYPE: Choose most appropriate type that describes your activity and completely answer all questions.

* HOST COMMAND: A host command is an activity that provides facilities for its own functions and the functions of other (tenant) activities. A host has accountability for Class 1 (land), and/or Class 2 (buildings, structures, and utilities) property, regardless of occupancy. It can also be a tenant at other host activities.

* Yes No (check one)

* TENANT COMMAND: A tenant command is an activity or unit that occupies facilities for which another activity (i.e., the host) has accountability. A tenant may have several hosts, although one is usually designated its primary host. If answer is "Yes," provide best known information for your primary host only.

* Yes No (check one)

Primary Host (current) UIC: _____

Primary Host (as of 01 Oct 1995) UIC: _____

Primary Host (as of 01 Oct 2001) UIC: _____

* INDEPENDENT ACTIVITY: For the purposes of this Data Call, this is the "catch-all" designator, and is defined as any activity not previously identified as a host or a tenant. The activity may occupy owned or leased space. Government Owned/Contractor Operated facilities should be included in this designation if not covered elsewhere.

* Yes No (check one)

4. SPECIAL AREAS: List all Special Areas. Special Areas are defined as Class 1/Class 2 property for which your command has responsibility that is not located on or contiguous to main complex.

* NONE

Activity: 62066

Data Call 1: General Installation Information, continued

5. DETACHMENTS: If your activity has detachments at other locations, please list them in the table below.

* NONE

6. BRAC IMPACT: Were you affected by previous Base Closure and Realignment decisions (BRAC-88, -91, and/or -93)? If so, please provide a brief narrative.

NO.

Data Call 1: General Installation Information, continued

7. MISSION: Do not simply report the standard mission statement. Instead, describe important functions in a bulletized format. Include anticipated mission changes and brief narrative explanation of change; also indicate if any current/projected mission changes are a result of previous BRAC-88, - 91, -93 action(s).

Current Missions

- * To conduct training and support the execution of training by assigned reserve personnel and units. Train and maintain assigned personnel and equipment in a state of readiness and availability which will permit rapid employment in the event of partial or full mobilization.
- * Manage assigned resources, and provide administrative, medical/dental and logistic support to assigned reserve units and reservists.
- * Coordinate training and administration of the Naval Reserve Program as directed by higher authority for all assigned reserve units and reservists, providing resources and management support as directed and necessary to ensure their readiness to perform their mobilization mission.
- * Provide standard training, management, administration, and resource management for locally assigned Naval reservists and to train reservists from other NAVRESCENs, thereby ensuring trained personnel are available for active duty in time of war, or national emergency and when authorized, to complement active duty forces in carrying out national policy.
- * In conjunction with other DOD components, Regional Planning Agents, and local community officials, the center trains and plans in order to maintain an effective level of disaster preparedness. Provide disaster relief and supply services when called upon by Federal Emergency Management Agency (FEMA).
- * Provide casualty assistance calls and funeral support for Navy and Marine Corps personnel, which includes active duty, reservists, and retirees for Central Western Wisconsin.
- * Maintain medical/legal cognizance over active duty Navy personnel assigned to or on leave or in a deserter/unauthorized absence status in local area, who are hospitalized or otherwise unable to return to permanent duty station because of medical conditions/legal issues. Conduct JAG investigations when directed by higher authority.

Activity: 62066

Data Call 1: General Installation Information, continued

- * Provide information/referrals to military families on medical (i.e., CHAMPUS) and financial issues.
- * Serve as link between Navy and local communities on a variety of public affairs issues and Navy related public affairs functions.

Projected Missions for FY 2001

- * No Anticipated Changes

THE EXPECTED NUMBER OF
SELRES WILL INCREASE DUE
TO PLANNED UNIT RELOCATION
RESULTING FROM ANTICIPATE
SURFACE ACTIVITY CLOSURES.

*for
error
2/2/94*

Activity: 62066

Data Call 1: General Installation Information, continued

8. UNIQUE MISSIONS: Describe any missions which are unique or relatively unique to the activity. Include information on projected changes. Indicate if your command has any National Command Authority or classified mission responsibilities.

Current Unique Missions

* NONE

Projected Unique Missions for FY 2001

* No Anticipated Changes

9. IMMEDIATE SUPERIOR IN COMMAND (ISIC): Identify your ISIC. If your ISIC is not your funding source, please identify that source in addition to the operational ISIC.

* Operational name	UIC
COMNAVRESREDCOMREG 16	68349
* Funding Source	UIC
COMNAVRESREDCOMREG 16	68349

Activity: 62066

Data Call 1: General Installation Information, continued

10. PERSONNEL NUMBERS: Host activities are responsible for totalling the personnel numbers for all of their tenant commands, even if the tenant command has been asked to separately report the data. The tenant totals here should match the total tally for the tenant listing provided subsequently in this Data Call (see Tenant Activity list). (Civilian count shall include Appropriated Fund personnel only.)

End Strength as of 01 January 1994

Officers Enlisted Civilian
(Appropriated)

*Reporting Command	<u>1</u>	<u>9</u>	<u>0</u>
*Selected Reserve	<u>20</u>	<u>194</u>	<u>0</u>

Authorized Positions as of 30 September 1994

Officers Enlisted Civilian
(Appropriated)

*Reporting Command	<u>1</u>	<u>9</u>	<u>0</u>
*Selected Reserve	<u>18</u>	<u>184</u>	<u>0</u>

11. KEY POINTS OF CONTACT (POC): Provide the work, FAX, and home telephone numbers for the Commanding Officer or OIC, and the Duty Officer. Include area code(s). You may provide other key POCs if so desired in addition to those above.

<u>Title/Name</u>	<u>Office</u>	<u>Fax</u>	<u>Home</u>
*CO LCDR John Christopher	(608) 788-2565	(608) 787-1055	(715) 342-1079
*COMMAND CHIEF PNC Gary T. Petty	(608) 788-2565	(608) 787-1055	(608) 787-5777
*Duty Officer CDO	(608) 788-2565	(608) 787-1055	(608) 791-8538 (Beeper)

Data Call 1: General Installation Information, continued

12. TENANT ACTIVITY LIST: This list must be all-inclusive. Tenant activities are to ensure that their host is aware of their existence and any "subleasing" of space. This list should include the name and UIC(s) of all organizations, shore commands and homeported units, active or reserve, DOD or non-DOD (include commercial entities). The tenant listing should be reported in the format provide below, listed in numerical order by UIC, separated into the categories listed below. Host activities are responsible for including authorized personnel numbers, on board as of 30 September 1994, for all tenants, even if those tenants have also been asked to provide this information on a separate Data Call. (Civilian count shall include Appropriated Fund personnel only.)

* Tenants residing on main complex (shore commands)

NONE

* Tenants residing on main complex (homeported units.)

NONE

* Tenants residing in Special Areas (Special Areas are defined as real estate owned by host command not contiguous with main complex; e.g. outlying fields).

NONE

* Tenants (Other than those identified previously).

NONE

Data Call 1: General Installation Information, continued

13. REGIONAL SUPPORT: Identify your relationship with other activities, not reported as a host/tenant, for which you provide support. Again, this list should be all-inclusive. The intent of this question is capture the full breadth of the mission of your command and your customer/supplier relationships. Include in your answer any Government Owned/Contractor Operated facilities for which you provide administrative oversight and control.

Activity name	Location	Support Function Provide
National Guard Armory	Onalaska, WI	Naval Reserve Mess Specialist to prepare serve Army reservists/ Verbal
VA Hospital	Tomah, WI	provide FH personnel for training support/ Verbal.
Ft McCoy	Ft McCoy, WI	provides FH personnel for training at Regional Medical Training Site/ Verbal.
City of La Crosse	La Crosse, WI	Support city for Memorial Day Veteran's Day observances. Polling station for elections/ Use License.

14. FACILITY MAPS: This is a primary responsibility of the plant account holders/host commands. Tenant activities are not required to comply with submission if it is known that your host activity has complied with the request. Maps and photos should not be dated earlier than 01 January 1991, unless annotated that no changes have taken place. Any recent changes should be annotated on the appropriate map or photo. Date and label all copies.

* Local Area Map. This map should encompass, at a minimum, a 50 mile radius of your activity. Indicate the name and location of all DoD activities within this area, whether or not you support that activity. Map should also provide the geographical relationship to the major civilian communities within this radius.

12 copies enclosed.

Activity: 62066

Data Call 1: General Installation Information, continued

* Installation Map / Activity Map / Base Map / General Development Map / Site Map. Provide the most current map of your activity, clearly showing all the land under ownership/control of your activity, whether owned or leased. Include all outlying areas, special areas, and housing. Indicate date of last update. Map should show all structures (numbered with a legend, if available) and all significant restrictive use areas/zones that encumber further development such as HERO, HERP, HERF, ESQD arcs, agricultural/forestry programs, environmental restrictions (e.g., endangered species).

2 copies 36" x 42" enclosed; 12 copies 11" x 17" enclosed.

* Aerial photo(s). Aerial shots should show all base use areas (both land and water) as well as any local encroachment sites/issues. You should ensure that these photos provide a good look at the areas identified on your Base Map as areas of concern/interest - remember, a picture tells a thousand words. Again, date and label all copies.

12 copies 8" x 11" enclosed.

* Air Installations Compatible Use Zones (AICUZ) Map.

N/A. Applies only to Naval Air Reserve.

BRAC-95 CERTIFICATION

Reference: SECNAVNOTE 11000 of 08 December 1993

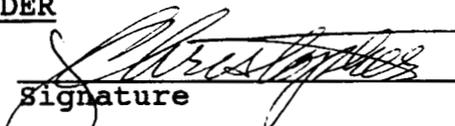
In accordance with policy set forth by the Secretary of the Navy, personnel of the Department of the Navy, uniformed and civilian, who provide information for use in the BRAC-95 process are required to provide a signed certification that states "I certify that the information contained herein is accurate and complete to the best of my knowledge and belief." The signing of this certification constitutes a representation that the certifying official has reviewed the information and either (1) personally vouches for its accuracy and completeness or (2) has possession of, and is relying upon, a certification executed by a competent subordinate.

Each individual in your activity generating information for the BRAC-95 process must certify that information. Enclosure (1) is provided for individual certifications and may be duplicated as necessary. You are directed to maintain those certifications at your activity for audit purposes. For purposes of this certification sheet, the commander of the activity will begin the certification process and each reporting senior in the Chain of Command reviewing the information will also sign this certification sheet. This sheet must remain attached to this package and be forwarded up the Chain of Command. Copies must be retained by each level in the Chain of Command for audit purposes.

I certify that the information contained herein is accurate and complete to the best of my knowledge and belief.

ACTIVITY COMMANDER

J. C. CHRISTOPHER, LCDR, USNR
NAME (Please type or print)


signature

COMMANDING OFFICER
Title
NAVAL RESERVE CENTER
LA CROSSE, WI (UIC: 62066)

28 JAN 1994

Date

Activity

I certify that the information contained herein is accurate and complete to the best of my knowledge and belief.

NEXT ECHELON LEVEL (if applicable)

STEPHEN D. BARRETT, CAPT, USNR
NAME (Please type or print)


Signature

Commander
Title

28 JAN 1994
Date

Naval Reserve Readiness Command Region Sixteen
Activity

I certify that the information contained herein is accurate and complete to the best of my knowledge and belief.

NEXT ECHELON LEVEL (if applicable)

J. W. FITZGERALD
NAME (Please type or print)



Signature

Commander - Acting

2 Feb 94

Title

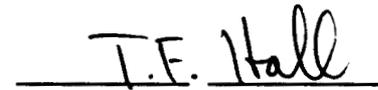
Date

COMNAVSURFRESFOR
Activity

I certify that the information contained herein is accurate and complete to the best of my knowledge and belief.

MAJOR CLAIMANT LEVEL

T.F. HALL
NAME (Please type or print)



Signature

Commander, Naval Reserve Force
4500 Bourne St.

2/10/94

New Orleans, LA 70146
Title

Date

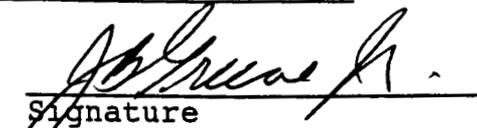
Activity

I certify that the information contained herein is accurate and complete to the best of my knowledge and belief.

DEPUTY CHIEF OF NAVAL OPERATIONS (LOGISTICS)
DEPUTY CHIEF OF STAFF (INSTALLATIONS & LOGISTICS)

J. B. GREENE, JTL
NAME (Please type or print)

ACTING
Title


Signature

16 FEB 99
Date

Document Separator

681

MILITARY VALUE ANALYSIS:
DATA CALL WORK SHEET FOR
RESERVE CENTER: La Crosse, Wisconsin
ACTIVITY UIC: 62066

Category..... Personnel Support
Subcategory..... Reserve Training Centers
Type..... Navy and Marine Corps Reserve Training Centers

*****If any responses are classified, attach a separate classified annex*****

ORIGINAL

UIC: 62066



Enclosure (2)

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Introduction

1. Purpose. This introduction provides general instructions for replying to this data call; individual questions and footnotes give specific instructions for completion of tables, computations, etc.

2. References

a. Refer to the NAVFAC P-72 for Facility (drill space) Category Code Numbers (CCNs).

b. Refer to the NAVFAC P-72 for Facility Category Code Numbers (CCNs).

c. NAVFAC P-80 provides a discussion of the general nature of each CCN; use it to delineate "types" of facilities that share a common CCN.

d. Refer to NAVFACINST 11010.44E for definition of adequate, substandard, and inadequate facilities.

3. Definition of Terms. For purposes of this data call the following apply:

a. A **Course of Instruction** (i.e. Navy Rights and Responsibilities Workshop, Operations Security) comprises one or more individual contact periods (classes).

b. A **Facility** is a space (e.g. a room), a defined area (e.g. a range), a structure (e.g. a building), or a structure other than a building (e.g. an obstacle course); it is possible for a building to house one or more facilities of different types.

4. Coordinating Instructions

a. Enter the primary UIC of the data call respondent at the bottom of each page of the response; ensure that additional pages created include this identifier.

b. Where information about current facilities available is requested, include MILCON projects that are not BRAC related, which have been authorized and appropriated and for which contracts are to be awarded by 30 September 1994; *do not* include projects submitted in the FY 95 Presidential Budget. Proposed MILCON projects in support of previous BRAC decisions should be included in response by gaining activities but excluded from closing or losing activities.

c. If any of the information requested is subject to change between now and the end of Fiscal Year 2001 due to known redesignations, realignments/closures or other action, provide current and projected data and so annotate.

d. Tenant activities of a Reserve Training Center that use space must be

UIC: 62066



accounted for under the Reserve Command/Center UIC for all courses taught and classroom space utilized.

e. Unless specified otherwise, "throughput" figures should include that from all sources (DON, other DoD, reserve and/or active components, and non-DoD).

f.. Use "N/A" to respond to a question and/or table that does not apply; **provide the reason(s) why it is not applicable.**

i. Provide best estimates where projections of future requirements are requested.



UIC: 62066

MISSION REQUIREMENTS

Mission Statement: State the mission of this Reserve Command/Center in sufficient detail that it can be distinguished from other Reserve facilities.

The mission of NRC La Crosse is to provide trained units and qualified personnel for designated active duty commands in the time of war or national emergency when authorized by law. Specifically personnel are trained to support the USS HUE CITY (CG-66), USS ACADIA (AD-42), Subase Pearl Harbor, Amphibious Construction Battalion One, Fleet Hospital 23, Construction Battalion 25, and Naval supply depot Subic Bay (Guam).

The geographic area which the 212 reservists who train at NRC La Crosse come from is Southwest Wisconsin, Southeast Minnesota, and Northwest Iowa. The center coordinates all AT, IDTT, ADT, ADSW orders and travel arrangements for reservists to conduct training at Gaining Commands. Locally the center conducts training by experts in specific fields (CAT, Exportable Training). The center also arranges practical training for the Fleet Hospital unit at the VA Hospital, Tomah, Wisconsin and the Regional Training Center, Fort McCoy.

UIC: 62066



Mission Requirements

A. Authorized/Directed Drill Utilization

1. Using the table below, indicate the utilization of drill space that are currently conducted at your Reserve Command/Center. For each utilization give the number of students trained, "throughput" during FY 1993, what facility in the Reserve Command/Center was utilized, or CCN outside of the Reserve Center, and the number of facility hours used in each utilization. A facility hour is equal to the number of facilities used times the number drill period hours per year the facility was occupied. For example if a Reserve Command/Center utilizes 5 classrooms, 48 weekends a year for 16 hours, the facility hours would be $5 \times 48 \times 16 = 3840$.

Purpose of Utilization	Student Throughput	# of Uses	Drill Space Utilized	Facility (space) Hours
CLASSES	211	77	CLASSROOM	1536
OFFICERS CALL	10	20	WARDROOM	20
LUNCH & QUARTERS	211	20	DRILL DECK	120
CLASSES	211	5	DRILL DECK	15
PHISICALS/HIV TEST	211	20	RM 110	20

Mission Requirements



2. For the instruction conducted by your personnel away from the Reserve Command/Center during Authorized Directed Drill periods, list the type of instruction, number of training instances, and the method of instruction (i.e. off-site instructor, audio visual presentation, etc.).

INSTRUCTION	FREQUENCY OF INSTRUCTION	METHOD OF INSTRUCTION
SWIM QUALS	2	REQUIRED SWIMMING POOL WITH QUALIFIED LIFEGUARD
WELDING	1	CIVILIAN AUGUMENTED TRAINING (CAT)



3. For the instruction available at your Reserve Command/Center, list the type of instruction, number of training instances, and the method of instruction (i.e. off-site instructor, audio visual presentation, video tape, etc.) that could be conducted away from your installation during your normal Authorized/Directed drilling periods.

INSTRUCTION	FREQUENCY OF INSTRUCTION PER YR.	METHOD OF INSTRUCTION
ALL COURSES OF INSTRUCTION COULD BE CONDUCTED AWAY FROM THE RESERVE CENTER		

4. List facility (drill space) uses of your Reserve Command/Center that require special/unique facilities (drill spaces) which are not reasonably available (within 100 miles) at any other Guard or Reserve Command/Center.

Course	Unique/Special Facility Requirements
NONE	

B. Other Training Support

1. Client/Customer Base.



a. List all Reserve units/tenants assigned and supported by this facility as of 30 September 1994, the UIC or identifying number, and their manning levels.

UNIT	MILITARY BRANCH	UIC	RESERVE MANNING LEVEL	ACTIVE DUTY SUPPORT MANNING LEVEL	CIVILIAN MANNING LEVEL
AD-42	NAVY	89679	35	10 PERSONNEL TO	NONE
NMCB-25	NAVY	85311	47	SUPPORT ALL	NONE
FH-500	NAVY	88339	40	SELRES UNITS.	NONE
SUBASE	NAVY	85016	25		NONE
VTU	NAVY	1611G	5		NONE
PHIB CB	NAVY	87369	42		NONE
					NONE
					NONE
					NONE

b. List all other units/groups not previously mentioned (active, reserve, guard, civilian, social agency, charitable organization, etc.) that utilizes space at your installation as of 30 September 1994.

UNIT	Facilities Used
MILITARY ENTRANCE PROCESSING STATION	CLASSROOM 100
SENIOR CITIZEN AEROBIC CLASS	DRILL DECK
VOTING	DRILL DECK
RETIRED OFFICERS ASSOCIATION	WARD ROOM

WEST POINT ACADEMY
MEETING

WARD ROOM

UIC: 62066



c. For Fiscal Year 1993 list the percentage of Authorized/Directed Drill Utilization performed at the Reserve Command/Center, Gaining Command or other site.

UNIT (Navy or Marine Corps)	SITE		
	Reserve Command/Center	Gaining Command	Other Site
SUBASE	85%	14%	1%
SUBIC	58%	42%	0%
AD-42	73%	26%	1%
CG-66	89%	10%	1%
PHIB CB 1	59%	41%	0%
NMCB-25	93%	7%	0%

FH-500 82% 18% 0%

d. For fiscal years 1991, 1992 and 1993, how many reservists not assigned to your facilities performed Authorized/Directed Drills at your site (i.e. for additional duty, convenience, unique equipment or trainer unitization, etc.)? Include all military branches and supply explanation.

NONE

e. What percentage of your assigned Navy and Marine Corps Reserve Units' Authorized/Directed Drill Utilization is spent in Fleet contributory (Peacetime) support both at your Reserve Command/Center and at other activities? Specify percentage and where performed.

SUBASE	14%	SUBASE PEARL HARBOR
SUBIC BAY	42%	NSD SUBIC BAY
AD-42	26%	USS ACADIA
CG-66	10%	USS HUE CITY
PHIB CB 1	41%	AMPHIBIOUS CORONADO
NMCB 25	7%	DEPLOYABLE
FH-500	18%	DEPLOYABLE



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4. **Demographics** (Duplicate All charts as necessary)

A. List the average travel distances of Navy and Marine Corps Reservists and number that travel those average distances.

	0 - 50 miles	51 - 100 miles	100+ miles
# of Personnel	146	55	7

B. List all military Guard and Reserve Command/Centers and distance within 100 miles of your reserve center:

Name of Center	miles
SEE ATTACHED	

C. List the all military Reserve Command/Centers and distance between 100 and 200 miles of your Reserve Command/Center:

Name of Center	miles
SEE ATTACHED	

D. List all the Navy and Marine Corps Reserve Command/Centers in your state and the distance from your Reserve Command/Center to these centers. Indicate any shared training resources or facilities with these Reserve Command/Centers (i.e. shared equipment, instructors instruction materials, facilities (drill space) or training areas, etc, without regard to scheduling and/or manning conflicts..

Name of Center	Miles	Resources Shared
FT MCCOY	28	RIFLE RANGE/RTS MEDS
TOMAH	43	FH PERSONNEL WORKED IN WARDS
VOLK FIELD	65	RIFLE RANGE



DEMOGRAPHICS

B. MILITARY GUARD AND RESERVE COMMAND/CENTERS WITHIN
100 MILES OF RESERVE CENTER.

WI. NATIONAL GUARD ARMORIES MILES

MARSHFIELD	60
NEILLSVILLE	65
BARABOO	80
REEDSBURG	82
EAU CLAIRE	76
CHIPPEWA FALLS	79
RICHLAND CENTER	55
MAUSTON	60
VIROQUA	30
ARCADIA	38
TOMAH	43
SPARTA	28
BLACKRIVER FALLS	40
PRAIRIE DU CHIEN	55
CAMP WILLIAMS	40
VOLK FIELD	50

MN NATIONAL GUARD ARMORIES MILES

WINONA	30
ROCHESTER	70
AUSTIN	90
RED WING	80

DEMOGRAPHICS

C. LIST THE MILITARY RESERVE COMMAND/CENTERS WITHIN
100 AND 200 MILES OF RESERVE CENTER.

NAVAL RESERVE CENTERS	MILES
GREEN BAY, WI.	180
OSHKOSH, WI.	135
STEVENS POINT, WI.	105
MADISON, WI.	105
MILWAUKEE, WI.	180
ST PAUL, MN.	143
DUBUQUE, IA.	100
CEDAR RAPIDS, WI.	190
WATERLOO, IA.	150

NATIONAL GUARD ARMORIES	MILES
OWOTONNA, MN.	110
FARIBAULT, MN.	145
HASTINGS, MN.	115
NORTHFIELD, MN.	115
CHARLES CITY, IA.	130
OELWIEN, IA.	130

E. List all other Guard, Reserve and non-DoD facilities within 100 miles your Reserve Command/Center that your assigned personnel could use for Authorized/Directed Drill Utilization or with which you could share resources or drill space (i.e shared equipment, instructors, instruction materials, facilities (drill space) or training areas, etc.), without regard for scheduling and/or manning conflicts.

NONE

F. For the entire Reserve Command/Center, summarize the average number of reservists on waiting lists for reserve billets in all units during the year. (i.e. VTU, IRR and recruits).

RESERVISTS	FISCAL YEAR 1994
OFFICER	3
ENLISTED	8

G. What are the unique demographics of your area that could help or hinder the recruitment of the type(s) and/or numbers of Navy/Marine Corps Selected Reservists needed to fulfill your requirements?(i.e. limited maritime access, small population center, etc.)

Five Universities within 30 miles of center provide large number of 18-23 year olds with above average intelligence for potential first term Naval Reserve enlistment.

H. What are the unique demographics of your area that could help or hinder the recruitment of the type(s) and/or numbers of Navy/Marine Corps Selected Reservists needed to fulfill requirements at other Reserve Command/Centers? (i.e. large population center, proximity to active Navy facilities, etc.)

The large college population which could provide a potential manpower pool for other reserve centers may not have the mobility to travel to other centers.

H. List any other military support missions currently conducted at/from your Reserve Command/Center (e.g., port of embarkation for USNR and USMCR personnel, other active duty/reserve personnel or logistics transfer missions).

Testing area for Military Entrance Processing Station (MEPS).

I. Are any new military missions planned for this Reserve Command/Center?

NO

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H. Other Non-Military Support

1. Does the Reserve Command/Center have a role in a disaster assistance plan, search and rescue, or local evacuation plan? If so, describe.

NO

2. Does the Reserve Command/Center provide any direct support to local civilian, governmental or military agencies? If so, describe (e.g. drug awareness programs, CPR Training, honor guards for funerals, color guards for civic functions, etc.)

1. MILITARY ENTRANCE PROCESSING
STATION (MEPS) TESTING

2. LA CROSSE PARK & RECREATION SENIOR CITIZEN AEROBICS
3. VOTING CENTER FOR CITY OF LA CROSSE

3. Are any new civilian or other non-DoD missions planned for this Reserve Command/Center? If so, describe.

NO



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Facilities

A. Facilities Description. Complete the following tables as applicable.

1. Naval Reserve Centers; Marine Corps Reserve Training & Administration Buildings; and Reserve Naval Construction Forces: In the following table, indicate the space available; average age; condition of the facility; plant value; and amount and cost of leased space. (Facility Type/Functions obtained from the Facility Planning Criteria For Navy and Marine Corps Shore Installations, NAVFAC P-80)

Facility Type/Function (in Sq. Ft. unless noted)	Av. Age	Ad-equate	Substan-dard	Inad-equate	Total	Plant Value	Leased Property (SF)	Cost of Leas Property
Admin 3012	43YRS	X			0	*		
Classrooms 6994	43YRS	X			0	*		
Trainers NONE								
Labs NONE								
Shops 2016	43YRS	X			0	*		
Bays NONE								
Storage 2585	43YRS	X			0	*		
Supply 238	43YRS	X			0	*		
Pistol Range (# of Facilities) NONE								
Other Ranges (Specify) (# of Facilities) NONE								
Armory NONE								
Parking - POV (Sq. Yds. (SY)) 4228	43YRS	X			0	*		
Parking - Organizational Vehicles (SY) NONE								
Land (Acres) 1.728	X				0	*	YES	ANNUAL \$8,000
Other (Specify)								

* \$1,705,000.00 TOTAL PLANT VALUE AND BUILDING.



2. Give the total square footage of the facilities (drill space) at your Reserve Center. Break out the square footage by the type of facilities (i.e. classroom, assembly hall, multi-media center, etc.), and within each type, by the material condition of the facility (i.e., Adequate, Substandard, and Inadequate).

Facility (drill space)Type	Square Footage	Adequate	Substandard	Inadequate
ADMIN	3,012	X		
CLASSROOMS	6,994	X		

3. In accordance with NAVFACINST 11010.44E, an inadequate facility cannot be made adequate for its present use through "economically justifiable means." For all the categories above where inadequate facilities are identified provide the following information:

- a. Facility Type/Code:
- b. What makes it inadequate?
- c. What use is being made of the facility?
- d. What is the cost to upgrade the facility to substandard?
- e. What other use could be made of the facility and at what cost?
- f. Current improvement plans and programmed funding:
- g. Has the facility's condition caused a "C3" or "C4" designation on your BASEREP?

NO INADEQUATE SPACES IDENTIFIED.

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6. Marine Corps Reserve Vehicle & Equipment Maintenance Facility: Complete the following table.

Facility Type	Automotive		Track/Artillery Heavy Equipment		General Space	Total
	Bays	SF	Bays	SF		
A	N/A					
B						
C						
D						
E						
F						
G						

SF———Provide gross square feet

General Space-Includes office, storage, work benches and toilets

NO MARINE CORPS UNITS ASSIGNED TO THIS CENTER.

Unit Type

Facility Types:
Facility Type

Companies:

Infantry/Military Police	A
Communications/Reconnaissance	B
Anglico/MT/Amphib Tractor/Tank	C
Engineer/Transport	D

Batteries:

105 mmHOW/155 mmHOW	C
LAAM	D
SP:155 mmHOW/8" HOW	E

Battalions:

Infantry/Reconnaissance	B
Tank/Artillery/Amphib Tractor/MT	C
Engineer/Artillery	E



7. Other Training Buildings

a. Give the square footage of any training buildings listed in the table below that are at available for use by your Reserve Center. Break out the square footage by the material condition of the facility (i.e., Adequate, Substandard, and Inadequate).

NONE

CCN	Type of Training Building	Adequate	Substandard	Inadequate
171-17	TV CTR/Instruction Matter			
171-25	Auditorium			
171-36	Radar Simulator Facility			
171-40	Drill Hall			
171-45	Mock-up and Training Aid Preparation Center			
171-50	Small Arms Range - Indoor			
171-60	Recruit Processing Building			
171-77	Training Material Storage			

8. In accordance with NAVFACINST 11010.44E, an inadequate facility cannot be made adequate for its present use through "economically justifiable means." For all the categories above where inadequate facilities are identified provide the following information:

- a. Facility Type/Code:
- b. What makes it inadequate?
- c. What use is being made of the facility?
- d. What is the cost to upgrade the facility to substandard?
- e. What other use could be made of the facility and at what cost?
- f. Current improvement plans and programmed funding:
- g. Has the facility's condition caused a "C3" or "C4" designation on your BASEREP?

NO SEPARATE TRAINING BUILDING LOCATED AT CENTER.

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9. Facilities (drill space) Other Than Buildings (CCN 179)

a. Using the table, give the number of training facilities other than buildings that are available for use or owned by your Reserve Command/Center. For each type of training facility, give the number that are in adequate, substandard, and inadequate condition. For the **Training Courses and Parade and Drill Fields** provide number of facilities/acres.

NONE

CCN	Training Facilities	Number of Facilities		
		Adequate	Substandard	Inadequate
179-35	Weapons Range Operations Tower			
179-40	Small Arms Range - Outdoor			
179-45	Training Mock-Ups			
179-50	Training Course	/	/	/
179-55	Combat Training Pool/Tank			
179-60	Parade and Drill Field	/	/	/
179-71	Electronic Warfare Training Range			
179-72	Underwater Tracking/Training Range			

10. In accordance with NAVFACINST 11010.44E, an inadequate facility cannot be made adequate for its present use through "economically justifiable means." For all the categories above where inadequate facilities are identified provide the following information:

- a. Facility Type/Code:
- b. What makes it inadequate?
- c. What use is being made of the facility?
- d. What is the cost to upgrade the facility to substandard?

NO OTHER TRAINING FACILITY LOCATED AT THIS CENTER.

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13. Complete the following table for all areas controlled by your Reserve Command/Center or available by mutual agreement, that could be used for Authorized/Directed Drill Utilization which are considered unusable (i.e., overgrown, impassable, etc.).

Potential Area	Unusable Acres	Reason Unusable
NONE		

14. List possible utilization areas controlled by your Reserve Command/Center or available by mutual agreement, where availability or use is limited by concurrent use of another training area or facility (i.e., proximity of live fire range, an LZ within a larger training area, etc.).

Training Area	Limitation(s) on Use or Availability
NONE	

a. For each training area with environmental restriction, describe the restriction and the impact on your Authorized/Directed Drill Utilization, and any mitigation required.

NONE	TRAINING AREA:
	RESTRICTION:
	IMPACT ON TRAINING:
	MITIGATION REQUIRED:

BERTHING CAPACITY

15. For each Pier/Wharf at your facility list the following structural characteristics.

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17. For each pier/wharf listed above state today's normal loading, the maximum capacity for berthing, maximum capacity for weapons handling evolutions, and maximum capacity to conduct intermediate maintenance.

Table 13.1

Pier/ Wharf	Typical Steady State Loading ¹	Ship Berthing Capacity	Ordnance Handling Pier Capacity ²	IMA Maintenance Pier Capacity ³
NO PIER	OR WHARF AT CENTER.			

- 1Typical pier loading by ship class with current facility ship loading.
- 2List the maximum number of ships that can be moored to conduct ordnance handling evolutions at each pier/berth without berth shifts. Consider safety, ESQD and access limitations.
- 3List the maximum number of ships that can be serviced in maintenance availabilities at each pier without berth shifts because of crane, laydown, or access limitations.



18. For each pier/wharf listed above, based on Presidential Budget 1995 budgeted infrastructure improvements in the Presidential Budget 1995 through FY 1997 and the BRAC-91 and BRAC-93 realignments, state the expected normal loading, the maximum capacity for berthing, maximum capacity for weapons handling evolutions, and maximum capacity to conduct intermediate maintenance.

Table 14.1

Pier/ Wharf	Typical Steady State Loading ¹	Ship Berthing Capacity	Ordnance Handling Pier Capacity ²	IMA Maintenance Pier Capacity ³
NO PIER OR WHARF AT CENTER.				

¹Typical pier loading by ship class with current facility ship loading:

²List the maximum number of ships that can be moored to conduct ordnance handling evolutions at each pier/berth without berth shifts. Consider safety, ESQD and access limitations.

³List the maximum number of ships that can be serviced in maintenance availabilities at each pier without berth shifts because of crane, laydown, or access limitations.



19.a. How much pier space is required to berth and support ancillary craft (tugs, barges, floating cranes, etc.) currently at your facility? Indicate if certain piers are uniquely suited to support these craft.

NONE

19.b. What is the average pier loading in ships per day due to visiting ships at your base. Indicate if it varies significantly by season.

NONE

19.c. Given no funding or manning limits, what modifications or improvements would you make to the waterfront infrastructure to increase the cold iron ship berthing capacity of your installation? Provide a description, cost estimates, and additional capacity gained.

NONE

19.d. Describe any unique limits or enhancements on the berthing of ships at specific piers at your base.

NONE

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20. WEAPONS AND MUNITIONS

Please answer the following questions if your activity performs any stowage or maintenance on any of the following ordnance commodities types:

NONE

1. Ordnance Stowage and Support

1.1 Provide present and predicted inventories (coordinate with inventory control manager) and maximum rated capability of all stowage facilities at each weapons storage location controlled by this activity. In predicting the out year facility utilization, distribute overall ordnance compliment to the most likely configuration. The maximum rated capability is also an out year projection taking into account any known or programmed upgrades that may increase current stowage capacity. When listing stowage facilities, group by location (e.g. main base, outlying field, special area).

Table 1.1: Total Facility Ordnance Stowage Summary

Facility Number	PRESENT INVENTORY		PREDICTED INVENTORY FY 2001		MAXIMUM RATED CAPABILITY	
	TONS	SQ FT	TONS	SQ FT	TONS	SQ FT
NO ORDNANCE AT CENTER.						
TOTAL						

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20.WEAPONS AND MUNITIONS, continued

1.2 For each Stowage facility identified in question 1.1 above, identify the type of facility (specify if "igloo", "box", etc.). Identify the type of ordnance commodity (from the list above) which are currently stowed in that facility and all other ordnance types which, given existing restrictions, could be physically accommodated in that stowage facility. Specify below if such additional accommodation would require a modification of the facility (e.g. enhanced environmental controls, ESQD waiver).

• Identify the reason(s) for which this ordnance is stored at your facility from the following list: own activity use (training); own activity use (operational stock); Receipt/Segregation/Stowage/Issue (RSSI); transshipment/awaiting issue; deep stow (war reserve); deep stow (awaiting Demil); other. Explain each "other" entry in the space provided, including ordnance stowed which is not a DON asset.

Table 1.2: Total Facility Ordnance Stowage Summary

Facility Number/Type	Currently Stowed Commodity Type(s)	Reason for Stowage at your Activity	Commodity Type(s) Which Can Be Stowed
NO WEAPONS OR	MUNITIONS KEPT AT	CENTER.	

Additional comments:



20. WEAPONS AND MUNITIONS, continued

1.3 Identify the rated category, rated NEW and status of ESQD arc for each stowage facility listed above.

Table 1.3: Facility Rated Status

Facility Number / Type	Hazard Rating (1.1-1.4)	Rated NEW	ESQD Arc		
			Established (Y / N)	Waiver (Y / N)	Waiver Expiration Date
NO WEAPONS OR MUNITIONS KEPT AT CENTER.					



Location

1. Proximity to Reservists.

- a. What is the importance of your location relative to the Reserve personnel supported?

77% OF RESERVISTS ARE WITHIN 50 MILES OF CENTER, MOSTLY WITHIN GREATER LA CROSSE AREA. WITHOUT CENTER IN LA CROSSE AREA THEY WOULD HAVE TO COMMUTE IN EXCESS OF 100 MILES TO DIFFERENT CENTER.

- b. On the average, how long does it take your personnel, including drilling reservists to reach your facility?

15-30 MINUTES

2. Proximity to Transportation Nodes. How far are the nearest air, rail, sea and ground transportation nodes?

AIR 7 MILES, RAIL 3 MILES, GROUND (INTERSTATE HWY) 5 MILES, BUS 2 MILES.

3. Proximity to Mobilization Sites. What is the importance of your location given your mobilization requirements?

NRC LA CROSSE HAS EASY ACCESS TO AIR, RAIL AND HIGHWAY TRANSPORTATION TO ALL PARTS OF THE COUNTRY THUS SIMPLIFYING MOBILIZATION TRANSPORTATION. FT MC COY, WHICH WAS A MAJOR EMBARKATION CENTER IS STILL OPEN AND ONLY 50 MILES FROM LA CROSSE.

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Weather

A. In Fiscal Year 1993, what percentage of drills were cancelled because reservists were unable to travel to the Reserve Command/Center due to weather conditions?

0% DRILLS MISSED DUE TO INCLEMENT WEATHER.

B. In Fiscal year 1993, what percentage of scheduled drills were cancelled because of weather?

0% DRILLS MISSED DUE TO INCLEMENT WEATHER.



UIC: 62066

Features and Capabilities

C. Unique Features

1. Does the geographic location and the associated natural features of this Reserve Command/Center contribute to the quality of training or detract from the quality of training at the installation? Explain.

NO, BASIC TWO STORY BUILDING.

2. What other factors beyond your control have affected training over the past five years? Describe the resulting impact.

NONE

3. Identify any unique (one of a kind) features (function, equipment, ranges, etc.) possessed by this Reserve Command/Center that have not been previously mentioned. Please list each feature separately and provide a narrative explanation of the importance of the unique feature.

NONE

UIC: 62066



Features and Capabilities

E. Ability for Expansion

1. Does the operational infrastructure of the Reserve Center (e.g., classrooms, administrative facilities, fuel and munitions storage, warehouse space) provide capabilities for future expansion or change in mission? If yes, explain why.

NO

2. What is the availability of adjacent acreage for possible future Reserve Training Center expansion or development?

NO ACERAGE AVAILABLE DUE TO THE FACT THE RESERVE CENTER IS IN A RESIDENTIAL AREA.

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Features and Capabilities

3. Identify in the table below the real estate resources which have the potential to facilitate future development and for which you are the plant account holder or into which, though a tenant, your activity could reasonably expect to expand. Complete a separate table for each individual site, i.e., main base, outlying airfields, special off-site areas, off base housing, etc. Unit of measure is acres. Developed area is defined as land currently with buildings, roads, and utilities that prevent it from being further developed without demolition of existing infrastructure. Include in "Restricted" areas that are restricted for future development due to environmental constraints (e.g. wet lands, landfills, archaeological sites), operational restrictions (e.g. ESQD arcs, HERO, HERP, HERF, AICUZ, ranges) or cultural resources. Identify the reason for the restriction when providing the acreage in the table below. Specify any other entry in "Other" (e.g. submerged lands).

NONE

Site Location: _____

Land Use	Total Acres	Developed	Available for Development	
			Restricted	Unrestricted
Operational	NONE			
Training				
Maintenance				
Research & Development				
Supply and Storage				
Admin				
Housing				
Recreational				
Navy Forestry Program				
Navy Agricultural Outlease Program				
Hunting/fishing Programs				
Other				
TOTAL				

Features and Capabilities

E. Ability for Expansion (cont.)

UIC: 62066



4. Identify the features of this Reserve Center that make it a strong candidate for supporting other types of training and units in the future.

NONE



UIC: 62066

Features and Capabilities

F. Quality of Life

1. Military Housing

(a) Family Housing:

(1) Do you have mandatory assignment to on-base housing? (circle) yes **no**

(2) For military family housing in your locale provide the following information:

Type of Quarters	Number of Bedrooms	Total number of units	Number Adequate	Number Substandard	Number Inadequate
Officer	4+	NO MILITARY	HOUSING AVAILABLE.		
Officer	3				
Officer	1 or 2				
Enlisted	4+				
Enlisted	3				
Enlisted	1 or 2				
Mobile Homes					
Mobile Home lots					

(3) In accordance with NAVFACINST 11010.44E, an inadequate facility cannot be made adequate for its present use through "economically justifiable means". For all the categories above where inadequate facilities are identified provide the following information:

Facility type/code:

What makes it inadequate?

What use is being made of the facility?

What is the cost to upgrade the facility to substandard?

What other use could be made of the facility and at what cost?

Current improvement plans and programmed funding:

Has this facility condition resulted in C3 or C4 designation on your BASEREP?



Features and Capabilities

F. Quality of Life (cont.)

(4) Complete the following table for the military housing waiting list.

Pay Grade	Number of Bedrooms	Number on List	Average Wait
O-6/7/8/9	1	NO MILITARY HOUSING AVAILABLE.	
	2		
	3		
	4+		
O-4/5	1		
	2		
	3		
	4+		
O-1/2/3/CWO	1		
	2		
	3		
	4+		
E7-E9	1		
	2		
	3		
	4+		
E1-E6	1		
	2		
	3		
	4+		



Features and Capabilities

F. Quality of Life (cont.)

**(5) What do you consider to be the top five factors driving the demand for base housing?
Does it vary by grade category? If so provide details.**

Top Five Factors Driving the Demand for Base Housing	
1	NO MILITARY HOUSING AVAILABLE
2	
3	
4	
5	

**(6) What percent of your family housing units have all the amenities required
by "The Facility Planning & Design Guide" (Military Handbook 1190 & Military Handbook 1035-Family Housing)?**

NO MILITARY HOUSING AVAILABLE

(7) Provide the utilization rate for family housing for FY 1993.

NO MILITARY HOUSING AVAILABLE

Type of Quarters	Utilization Rate
Adequate	
Substandard	
Inadequate	

**(8) As of 31 March 1994, have you experienced much of a change since FY 1993? If so, why?
If occupancy is under 98% (or vacancy over 2%), is there a reason?**

NO MILITARY HOUSING AVAILABLE



Features and Capabilities

F. Quality of Life (cont.)

(b) **BEQ:**

(1) Provide the utilization rate for BEQs for FY 1993.

NO BEQ AVAILABLE

Type of Quarters	Utilization Rate
Adequate	
Substandard	
Inadequate	

(2) As of 31 March 1994, have you experienced much of a change since FY 1993? If so, why? If occupancy is under 95% (or vacancy over 5%), is there a reason?

NO BEQ AVAILABLE

(3) Calculate the Average on Board (AOB) for geographic bachelors as follows:

NO BEQ AVAILABLE

$$\text{AOB} = \frac{(\# \text{ Geographic Bachelors} \times \text{average number of days in barracks})}{365}$$

(4) Indicate in the following chart the percentage of geographic bachelors (GB) by category of reasons for family separation. Provide comments as necessary.

NO BEQ AVAILABLE

Reason for Separation from Family	Number of GB	Percent of GB	Comments
Family Commitments (children in school, financial, etc.)			
Spouse Employment (non-military)			
Other			
TOTAL		100	

(5) How many geographic bachelors do not live on base?

NO BEQ AVAILABLE



Features and Capabilities

F. Quality of Life (cont.)

(c) BOQ:

(1) Provide the utilization rate for BOQs for FY 1993.
NO NOQ AVAILABLE

Type of Quarters	Utilization Rate
Adequate	
Substandard	
Inadequate	

(2) As of 31 March 1994, have you experienced much of a change since FY 1993? If so, why? If occupancy is under 95% (or vacancy over 5%), is there a reason?
NO BOQ AVAILABLE

(3) Calculate the Average on Board (AOB) for geographic bachelors as follows:
NO BOQ AVAILABLE

$$\text{AOB} = \frac{\text{\# Geographic Bachelors} \times \text{average number of days in barracks}}{365}$$

(4) Indicate in the following chart the percentage of geographic bachelors (GB) by category of reasons for family separation. Provide comments as necessary.
NO BOQ AVAILABLE

Reason for Separation from Family	Number of GB	Percent of GB	Comments
Family Commitments (children in school, financial, etc.)			
Spouse Employment (non-military)			
Other			
TOTAL		100	

(5) How many geographic bachelors do not live on base?

NO BOQ AVAILABLE



Features and Capabilities

F. Quality of Life (cont.)

2. For on-base MWR facilities available, complete the following table for each separate location. For off-base government owned or leased recreation facilities indicate distance from base. If there are any facilities not listed, include them at the bottom of the table.

LOCATION _____ DISTANCE _____
 CENTER NOT LOCATED ON BASE.

Facility	Unit of Measure	Total	Profitable (Y,N,N/A)
Auto Hobby	Indoor Bays		
	Outdoor Bays		
Arts/Crafts	SF		
Wood Hobby	SF		
Bowling	Lanes		
Enlisted Club	SF		
Officer's Club	SF		
Library	SF		
Library	Books		
Theater	Seats		
ITT	SF		
Museum/Memorial	SF		
Pool (indoor)	Lanes		
Pool (outdoor)	Lanes		
Beach	LF		
Swimming Ponds	Each		
Tennis CT	Each		

Features and Capabilities

F.. Quality of Life (cont.)

Facility	Unit of Measure	Total	Profitable (Y,N,N/A)
Volleyball CT (outdoor)	Each		

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Basketball CT (outdoor)	Each		
Racquetball CT	Each		
Golf Course	Holes		
Driving Range	Tee Boxes		
Gymnasium	SF		
Fitness Center	SF		
Marina	Berths		
Stables	Stalls		
Softball Fld	Each		
Football Fld	Each		
Soccer Fld	Each		
Youth Center	SF		

3. Is your library part of a regional interlibrary loan program?

NO



Features and Capabilities

F. Quality of Life (cont.)

4. Base Family Support Facilities and Programs

a. Complete the following table on the availability of child care in a child care center on your base.

Age Category	Capacity (Children)	SF			Number on Wait List	Average Wait (Days)
		Adequate	Substandard	Inadequate		
0-6 Mos	NO BASE, NONE AVAILABLE.					
6-12 Mos						
12-24 Mos						
24-36 Mos						
3-5 Yrs						

b. In accordance with NAVFACINST 11010.44E, an inadequate facility cannot be made adequate for its present use through "economically justifiable means." For all the categories above where inadequate facilities are identified provide the following information:

Facility type/code:

What makes it inadequate?

What use is being made of the facility?

What is the cost to upgrade the facility to substandard?

What other use could be made of the facility and at what cost?

Current improvement plans and programmed funding:

Has this facility condition resulted in C3 or C4 designation on your BASEREP?

c. If you have a waiting list, describe what programs or facilities other than those sponsored by your command are available to accommodate those on the list.

d. How many "certified home care providers" are registered at your base?

e. Are there other military child care facilities within 30 minutes of the base? State owner and capacity (i.e., 60 children, 0-5 yrs).



Features and Capabilities

F.. Quality of Life (cont.)

f. Complete the following table for services available on your base. If you have any services not listed, include them at the bottom.

Service	Unit of Measure	Qty
Exchange	SF	CENTER NOT LOCATED ON BASE
Gas Station	SF	
Auto Repair	SF	
Auto Parts Store	SF	
Commissary	SF	
Mini-Mart	SF	
Package Store	SF	
Fast Food Restaurants	Each	
Bank/Credit Union	Each	
Family Service Center	SF	
Laundromat	SF	
Dry Cleaners	Each	
ARC	PN	
Chapel	PN	
FSC Classrm/Auditorium	PN	

5. Proximity of closest major metropolitan areas (provide at least three):

City	Distance (Miles)
MINNEAPOLIS	175
MILWAUKEE	202
CHICAGO	266

Features and Capabilities

C. Quality of Life (cont.)



6. Standard Rate VHA Data for Cost of Living:

Paygrade	With Dependents	Without Dependents
E1	0	0
E2	0	0
E3	0	0
E4	0	0
E5	0	0
E6	0	0
E7	17.17	11.93
E8	20.54	15.53
E9	54.32	41.23
W1	31.51	23.93
W2	0	0
W3	5.63	4.58
W4	0	0
O1E	0	0
O2E	0	0
O3E	0	0
O1	0	0
O2	0	0
O3	0	0
O4	0	0
O5	0	0
O6	0	0
O7	0	0

Features and Capabilities

F.. Quality of Life (cont.)

7. Off-base housing rental and purchase

(a) Fill in the following table for average rental costs in the area for the period 1 April 1993 through 31



March 1994.

Type Rental	Average Monthly Rent		Average Monthly Utilities Cost
	Annual High	Annual Low	
Efficiency	200 - 230	180	75.00
Apartment (1-2 Bedroom)	340 - 425	250 - 300	75.00
Apartment (3+ Bedroom)	550	350	100.00
Single Family Home (3 Bedroom)	700	450	100.00
Single Family Home (4+ Bedroom)	750	500	125.00
Town House (2 Bedroom)	340 - 425	250 - 300	75.00
Town House (3+ Bedroom)	530 - 605	350 - 420	100.00
Condominium (2 Bedroom)	400	500	75.00
Condominium (3+ Bedroom)	550	600	100.00

UIC: 62066



Features and Capabilities

F. Quality of Life (cont.)

(b) What was the rental occupancy rate in the community as of 31 March 1994?

Type Rental	Percent Occupancy Rate
Efficiency	90% - 95%
Apartment (1-2 Bedroom)	90% - 95%
Apartment (3+ Bedroom)	90% - 95%
Single Family Home (3 Bedroom)	90% - 95%
Single Family Home (4+ Bedroom)	90% - 95%
Town House (2 Bedroom)	90% - 95%
Town House (3+ Bedroom)	90% - 95%
Condominium (2 Bedroom)	90% - 95%
Condominium (3+ Bedroom)	90% - 95%

(c) What are the median costs for homes in the area?

Type of Home	Median Cost
Single Family Home (3 Bedroom)	72,000
Single Family Home (4+ Bedroom)	84,000
Town House (2 Bedroom)	NO SALES IN AREA
Town House (3+ Bedroom)	NO SALES IN AREA
Condominium (2 Bedroom)	95,000
Condominium (3+ Bedroom)	110,000

Features and Capabilities

F. Quality of Life (cont.)

UIC: 62066



(d) For calendar year 1993, from the local MLS listings provide the number of 2, 3, and 4 bedroom homes available for purchase. Use only homes for which monthly payments would be within 90 to 110 percent of the E5 BAQ and VHA for your area.

Month	Number of Bedrooms		
	2	3	4+
January	5	7	5
February	6	6	3
March	10	2	5
April	10	10	1
May	3	5	1
June	7	10	0
July	3	4	2
August	9	8	2
September	2	3	2
October	5	8	0
November	3	4	0
December	3	4	0

(e) Describe the principle housing cost drivers in your local area.

1. LOW CRIME RATE
2. JOB OPPORTUNITIES
3. EXCELLENT SCHOOLS



Features and Capabilities

F. Quality of Life (cont.)

8. For the top five sea intensive ratings in the principle warfare community your base supports, provide the following:

Rating	Number Sea Billets in the Local Area	Number of Shore billets in the Local Area
NONE		

9. Complete the following table for the average one-way commute for the five largest concentrations of military and civilian personnel living off-base.

Location	% Employees	Distance (mi)	Time(min)
FT MCCOY		28	20 MIN
MINNEAPOLIS, MN		143	2½ HOURS
GREAT LAKES, IL		250	4 HOURS
GLENVIEW, IL		260	4½ HOURS
FT SHERIDAN, IL		240	3½ HOURS



Features and Capabilities

F. Quality of Life (cont.)

(b) List the educational institutions within 30 miles which offer programs off-base available to service members and their adult dependents. Indicate the extent of their programs by placing a "Yes" or "No" in all boxes as applies.

Institution	Type Classes	Program Type(s)				
		Adult High School	Vocational/ Technical	Undergraduate		Graduate
				Courses only	Degree Program	
WESTERN WISCONSIN TECHNICAL COLLEGE	Day	YES	YES	YES	YES	YES
	Night	YES	YES	YES	YES	YES
UNIVERSITY OF WISCONSIN IN LA CROSSE	Day	YES	YES	YES	YES	YES
	Night	YES	YES	YES	YES	YES
VITERBO COLLEGE	Day	YES	YES	YES	YES	YES
	Night	YES	YES	YES	YES	YES
WINONA STATE COLLEGE	Day	YES	YES	YES	YES	YES
	Night	YES	YES	YES	YES	YES
SAINT MARY'S COLLEGE	DAY	YES	YES	YES	YES	YES
	NIGHT	YES	YES	YES	YES	YES



Features and Capabilities

F. Quality of Life (cont.)

(c) List the educational institutions which offer programs on-base available to service members and their adult dependents. Indicate the extent of their programs by placing a "Yes" or "No" in all boxes as applies.

Institution	Type Classes	Program Type(s)				
		Adult High School	Vocational/ Technical	Undergraduate		Graduate
				Courses only	Degree Program	
N/A CENTER NOT LOCATED ON BASE.						
	Day					
	Night					
	Corres-pondence					
	Day					
	Night					
	Corres-pondence					
	Day					
	Night					
	Corres-pondence					
	Day					
	Night					
	Corres-pondence					



Features and Capabilities

F. Quality of Life (cont.)

11. Spousal Employment Opportunities

Provide the following data on spousal employment opportunities.

Skill Level	Number of Military Spouses Serviced by Family Service Center Spouse Employment Assistance			Local Community Unemployment Rate
	1991	1992	1993	
Professional	NO FAMILY SERVICE CENTER			
Manufacturing				
Clerical				
Service				
Other				

12. Do your active duty personnel have any difficulty with access to medical or dental care, in either the military or civilian health care system? Develop the why of your response.

NO. TWO MAJOR HOSPITALS AND CLINICS PROVIDE MEDICAL AND DENTAL CARE.

13. Do your military dependents have any difficulty with access to medical or dental care, in either the military or civilian health care system? Develop the why of your response.

NO. TWO MAJOR HOSPITALS AND CLINICS PROVIDE MEDICAL AND DENTAL CARE.



Features and Capabilities
F. Quality of Life (cont.)

14. Complete the table below to indicate the crime rate for your air station for the last three fiscal years. The source for case category definitions to be used in responding to this question are found in NCIS - Manual dated 23 February 1989, at Appendix A, entitled "Case Category Definitions." Note: the crimes reported in this table should include 1) all reported criminal activity which occurred on base regardless of whether the subject or the victim of that activity was assigned to or worked at the base; and 2) all reported criminal activity off base.

Crime Definitions	FY 1991	FY 1992	FY 1993
1. Arson (6A)			
Base Personnel - military	0	0	0
Base Personnel - civilian	0	0	0
Off Base Personnel - military	0	0	0
Off Base Personnel - civilian	5	2	12
2. Blackmarket (6C)			
Base Personnel - military	0	0	0
Base Personnel - civilian	0	0	0
Off Base Personnel - military	0	0	0
Off Base Personnel - civilian	INFORMATION NOT AVAILABLE		
3. Counterfeiting (6G)			
Base Personnel - military	0	0	0
Base Personnel - civilian	0	0	0
Off Base Personnel - military	0	0	0
Off Base Personnel - civilian	INFORMATION NOT AVAILABLE		
4. Postal (6L)			
Base Personnel - military	0	0	0
Base Personnel - civilian	0	0	0
Off Base Personnel - military	0	0	0
Off Base Personnel - civilian	INFORMATION NOT AVAILABLE		



Features and Capabilities

F. Quality of Life (cont.)

Crime Definitions	FY 1991	FY 1992	FY 1993
5. Customs (6M)			
Base Personnel - military	0	0	0
Base Personnel - civilian	0	0	0
Off Base Personnel - military	0	0	0
Off Base Personnel - civilian			
6. Burglary (6N)			
Base Personnel - military	0	0	1
Base Personnel - civilian	0	0	0
Off Base Personnel - military	0	0	0
Off Base Personnel - civilian	175	174	183
7. Larceny - Ordnance (6R)			
Base Personnel - military	0	0	0
Base Personnel - civilian	0	0	0
Off Base Personnel - military	0	0	0
Off Base Personnel - civilian	3033	2777	2625
8. Larceny - Government (6S)			
Base Personnel - military	0	0	0
Base Personnel - civilian	0	0	0
Off Base Personnel - military	0	0	0
Off Base Personnel - civilian	0	0	0



Features and Capabilities

F. Quality of Life (cont.)

Crime Definitions	FY 1991	FY 1992	FY 1993
9. Larceny - Personal (6T)			
Base Personnel - military	0	0	0
Base Personnel - civilian	0	0	0
Off Base Personnel - military	0	0	0
Off Base Personnel - civilian	INFORMATION NOT AVAILABLE		
10. Wrongful Destruction (6U)			
Base Personnel - military	0	0	0
Base Personnel - civilian	0	0	0
Off Base Personnel - military	0	0	0
Off Base Personnel - civilian			
11. Larceny - Vehicle (6V)			
Base Personnel - military	0	0	0
Base Personnel - civilian	0	0	0
Off Base Personnel - military	0	0	0
Off Base Personnel - civilian	INFORMATION NOT AVAILABLE		
12. Bomb Threat (7B)			
Base Personnel - military	0	0	0
Base Personnel - civilian	0	0	0
Off Base Personnel - military	0	0	0
Off Base Personnel - civilian	INFORMATION NOT AVAILABLE		



Features and Capabilities

F. Quality of Life (cont.)

Crime Definitions	FY 1991	FY 1992	FY 1993
13. Extortion (7E)			
Base Personnel - military	0	0	0
Base Personnel - civilian	0	0	0
Off Base Personnel - military	0	0	0
Off Base Personnel - civilian	INFORMATION NOT AVAILABLE		
14. Assault (7G)			
Base Personnel - military	0	0	0
Base Personnel - civilian	0	0	0
Off Base Personnel - military	0	0	0
Off Base Personnel - civilian	490	451	500
15. Death (7H)			
Base Personnel - military	0	0	0
Base Personnel - civilian	0	0	0
Off Base Personnel - military	0	0	0
Off Base Personnel - civilian	INFORMATION NOT AVAILABLE		
16. Kidnapping (7K)			
Base Personnel - military	0	0	0
Base Personnel - civilian	0	0	0
Off Base Personnel - military	0	0	0
Off Base Personnel - civilian	INFORMATION NOT AVAILABLE		



Features and Capabilities

F. Quality of Life (cont.)

Crime Definitions	FY 1991	FY 1992	FY 1993
18. Narcotics (7N)			
Base Personnel - military	0	0	0
Base Personnel - civilian	0	0	0
Off Base Personnel - military	0	0	0
Off Base Personnel - civilian	71	119	86
19. Perjury (7P)			
Base Personnel - military	0	0	0
Base Personnel - civilian	0	0	0
Off Base Personnel - military	0	0	0
Off Base Personnel - civilian	INFORMATION NOT AVAILABLE		
20. Robbery (7R)			
Base Personnel - military	0	0	0
Base Personnel - civilian	0	0	0
Off Base Personnel - military	0	0	0
Off Base Personnel - civilian	12	11	13
21. Traffic Accident (7T)			
Base Personnel - military	0	0	0
Base Personnel - civilian	0	0	0
Off Base Personnel - military	0	0	0
Off Base Personnel - civilian	3041	2768	



Features and Capabilities

F. Quality of Life (cont.)

Crime Definitions	FY 1991	FY 1992	FY 1993
22. Sex Abuse - Child (8B)			
Base Personnel - military	0	0	0
Base Personnel - civilian	0	0	0
Off Base Personnel - military	0	0	0
Off Base Personnel - civilian	INFORMATION NOT AVAILABLE		
23. Indecent Assault (8D)			
Base Personnel - military	0	0	0
Base Personnel - civilian	0	0	0
Off Base Personnel - military	0	0	0
Off Base Personnel - civilian	INFORMATION NOT AVAILABLE		
24. Rape (8F)			
Base Personnel - military	0	1	0
Base Personnel - civilian	0	0	0
Off Base Personnel - military	0	0	0
Off Base Personnel - civilian	17	9	7
25. Sodomy (8G)			
Base Personnel - military	0	0	0
Base Personnel - civilian	0	0	0
Off Base Personnel - military	0	0	0
Off Base Personnel - civilian	INFORMATION NOT AVAILABLE		



BRAC-95 CERTIFICATION

I certify that the information contained herein is accurate and complete to the best of my knowledge and belief.

WILKIE, JAMES E.
NAME (Please type or print)

COMMANDING OFFICER
Title

ADMIN
Division

ADMIN
Department

NRC LA CROSSE, WI
Activity

James E. Wilkie
Signature

16 June 1994
Date



Data Call 49

Activity: *NRC LA CROSSE, WI*

I certify that the information contained herein is accurate and complete to the best of my knowledge and belief.

DEPUTY CHIEF OF NAVAL OPERATIONS (LOGISTICS)
DEPUTY CHIEF OF STAFF (INSTALLATIONS & LOGISTICS)

J. B. GREENE, JR.

Name

ACTING

Title

J. B. Greene, Jr.

Signature

14 JUL 1994

Date

I certify that the information contained herein is accurate and complete to the best of my knowledge and belief.

NEXT ECHELON LEVEL (if applicable)

S. D. BARRETT, CAPT, USNR
NAME (Please type or print)

S. D. Barrett
Signature

COMMANDER
Title

20 JUNE 94
Date

COMNAVRESREDCOM REG 16
Activity

I certify that the information contained herein is accurate and complete to the best of my knowledge and belief.

NEXT ECHELON LEVEL (if applicable)

J. W. FITZGERALD, CAPT, USNR
NAME (Please type or print)

J. W. Fitzgerald
Signature
28 JUN 1994

COMMANDER (ACTING)
Title

Date

COMNAVSURFRESFOR
Activity

I certify that the information contained herein is accurate and complete to the best of my knowledge and belief.

MAJOR CLAIMANT LEVEL

T. F. HALL, RADM, USN
NAME (Please type or print)

TF Hall
Signature

COMMANDER
Title

7/5/94
Date

COMNAVRESFOR
Activity

BRAC-95 CERTIFICATION

Reference: SECNAVNOTE 11000 of 08 December 1993

In accordance with policy set forth by the Secretary of the Navy, personnel of the Department of the Navy, uniformed and civilian, who provide information for use in the BRAC-95 process are required to provide a signed certification that states "I certify that the information contained herein is accurate and complete to the best of my knowledge and belief." The signing of this certification constitutes a representation that the certifying official has reviewed the information and either (1) personally vouches for its accuracy and completeness or (2) has possession of, and is relying upon, a certification executed by a competent subordinate.

Each individual in your activity generating information for the BRAC-95 process must certify that information. Enclosure (1) is provided for individual certifications and may be duplicated as necessary. You are directed to maintain those certifications at your activity for audit purposes. For purposes of this certification sheet, the commander of the activity will begin the certification process and each reporting senior in the Chain of Command reviewing the information will also sign this certification sheet. This sheet must remain attached to this package and be forwarded up the Chain of Command. Copies must be retained by each level in the Chain of Command for audit purposes.

I certify that the information contained herein is accurate and complete to the best of my knowledge and belief.

ACTIVITY COMMANDER

WILKIE, JAMES E., LCDR
NAME (Please type or print)

James E. Wilkie
Signature

COMMANDING OFFICER
Title

16 June 1994
Date

NRC LA CROSSE, WI
Activity



621

**DATA CALL 66
INSTALLATION RESOURCES**

Activity Information:

Activity Name:	NRC LACROSSE, WI
UIC:	62066
Host Activity Name (if response is for a tenant activity):	
Host Activity UIC:	

General Instructions/Background. A separate response to this data call must be completed for each Department of the Navy (DON) host, independent and tenant activity which separately budgets BOS costs (regardless of appropriation), and, is located in the United States, its territories or possessions.

1. Base Operating Support (BOS) Cost Data. Data is required which captures the total annual cost of operating and maintaining Department of the Navy (DON) shore installations. Information must reflect FY 1996 budget data supporting the FY 1996 NAVCOMPT Budget Submit. Two tables are provided. Table 1A identifies "Other than DBOF Overhead" BOS costs and Table 1B identifies "DBOF Overhead" BOS costs. These tables must be completed, as appropriate, for all DON host, independent or tenant activities which separately budget BOS costs (regardless of appropriation), and, are located in the United States, its territories or possessions. Responses for DBOF activities may need to include both Table 1A and 1B to ensure that all BOS costs, including those incurred by the activity in support of tenants, are identified. If both table 1A and 1B are submitted for a single DON activity, please ensure that no data is double counted (that is, included on both Table 1A and 1B). The following tables are designed to collect all BOS costs currently budgeted, regardless of appropriation, e.g., Operations and Maintenance, Research and Development, Military Personnel, etc. Data must reflect FY 1996 and should be reported in thousands of dollars.

a. Table 1A - Base Operating Support Costs (Other Than DBOF Overhead). This Table should be completed to identify "Other Than DBOF Overhead" Costs. Display, in the format shown on the table, the O&M, R&D and MPN resources currently budgeted for BOS services. O&M cost data must be consistent with data provided on the BS-1 exhibit. Report only direct funding for the activity. Host activities should not include reimbursable support provided to tenants, since tenants will be separately reporting these costs. Military personnel costs should be included on the appropriate lines of the table. Please ensure that individual lines of the table do not include duplicate costs. Add additional

**DATA CALL 66
INSTALLATION RESOURCES**

lines to the table (following line 2j., as necessary, to identify any additional cost elements not currently shown). Leave shaded areas of table blank.

Table 1A - Base Operating Support Costs (Other Than DBOF Overhead)			
Activity Name: NRC LACROSSE, WI			UIC: 62066
Category	FY 1996 BOS Costs (\$000)		
	Non-Labor	Labor	Total
1. Real Property Maintenance Costs:			
1a. Maintenance and Repair	3		3
1b. Minor Construction			
1c. Sub-total 1a. and 1b.	3		3
2. Other Base Operating Support Costs:			
2a. Utilities	14		14
2b. Transportation			
2c. Environmental	1		1
2d. Facility Leases			
2e. Morale, Welfare & Recreation			
2f. Bachelor Quarters			
2g. Child Care Centers			
2h. Family Service Centers			
2i. Administration	25		25
2j. Other (Specify) - Basecomm	3		3
2k. Sub-total 2a. through 2j:	43		43
3. Grand Total (sum of 1c. and 2k.):	46		46

**DATA CALL 66
INSTALLATION RESOURCES**

b. Funding Source. If data shown on Table 1A reflects more than one appropriation, then please provide a break out of the total shown for the "3. Grand-Total" line, by appropriation:

<u>Appropriation</u>	<u>Amount (\$000)</u>
N/A	

c. Table 1B - Base Operating Support Costs (DBOF Overhead). This Table should be submitted for all current DBOF activities. Costs reported should reflect BOS costs supporting the DBOF activity itself (usually included in the G&A cost of the activity). For DBOF activities which are tenants on another installation, total cost of BOS incurred by the tenant activity for itself should be shown on this table. It is recognized that differences exist among DBOF activity groups regarding the costing of base operating support: some groups reflect all such costs only in general and administrative (G&A), while others spread them between G&A and production overhead. Regardless of the costing process, all such costs should be included on Table 1B. The Minor Construction portion of the FY 1996 capital budget should be included on the appropriate line. Military personnel costs (at civilian equivalency rates) should also be included on the appropriate lines of the table. Please ensure that individual lines of the table do not include duplicate costs. Also ensure that there is no duplication between data provided on Table 1A. and 1B. These two tables must be mutually exclusive, since in those cases where both tables are submitted for an activity, the two tables will be added together to estimate total BOS costs at the activity. Add additional lines to the table (following line 21., as necessary, to identify any additional cost elements not currently shown). Leave shaded areas of table blank.

Other Notes: All costs of operating the five Major Range Test Facility Bases at DBOF activities (even if direct RDT&E funded) should be included on Table 1B. Weapon Stations should include underutilized plant capacity costs as a DBOF overhead "BOS expense" on Table 1B.. N/A

**DATA CALL 66
INSTALLATION RESOURCES**

N/A

Table 1B - Base Operating Support Costs (DBOF Overhead)			
Activity Name: NRC LACROSSE, WI		UIC: 62066	
Category	FY 1996 Net Cost From UC/FUND-4 (\$000)		
	Non-Labor	Labor	Total
1. Real Property Maintenance Costs:			
1a. Real Property Maintenance (> \$15K)			
1b. Real Property Maintenance (< \$15K)			
1c. Minor Construction (Expensed)			
1d. Minor Construction (Capital Budget)			
1c. Sub-total 1a. through 1d.			
2. Other Base Operating Support Costs:			
2a. Command Office			
2b. ADP Support			
2c. Equipment Maintenance			
2d. Civilian Personnel Services			
2e. Accounting/Finance			
2f. Utilities			
2g. Environmental Compliance			
2h. Police and Fire			
2i. Safety			
2j. Supply and Storage Operations			
2k. Major Range Test Facility Base Costs			
2l. Other (Specify)			
2m. Sub-total 2a. through 2l:			
3. Depreciation			
4. Grand Total (sum of 1c., 2m., and 3.) :			

**DATA CALL 66
INSTALLATION RESOURCES**

2. Services/Supplies Cost Data. The purpose of Table 2 is to provide information about projected FY 1996 costs for the purchase of services and supplies by the activity. (Note: Unlike Question 1 and Tables 1A and 1B, above, this question is not limited to overhead costs.) The source for this information, where possible, should be either the NAVCOMPT OP-32 Budget Exhibit for O&M activities or the NAVCOMPT UC/FUND-1/IF-4 exhibit for DBOF activities. Information must reflect FY 1996 budget data supporting the FY 1996 NAVCOMPT Budget Submit. Break out cost data by the major sub-headings identified on the OP-32 or UC/FUND-1/IF-4 exhibit, disregarding the sub-headings on the exhibit which apply to civilian and military salary costs and depreciation. Please note that while the OP-32 exhibit aggregates information by budget activity, this data call requests OP-32 data for the activity responding to the data call. Refer to NAVCOMPTINST 7102.2B of 23 April 1990, Subj: Guidance for the Preparation, Submission and Review of the Department of the Navy (DON) Budget Estimates (DON Budget Guidance Manual) with Changes 1 and 2 for more information on categories of costs identified. Any rows that do not apply to your activity may be left blank. However, totals reported should reflect all costs, exclusive of salary and depreciation.

Table 2 - Services/Supplies Cost Data	
Activity Name: NRC LACROSSE, WI	UIC: 62066
Cost Category	FY 1996 Projected Costs (\$000)
Travel:	6
Material and Supplies (including equipment):	5
Industrial Fund Purchases (other DBOF purchases):	4
Transportation:	
Other Purchases (Contract support, etc.):	31
Total:	46

**DATA CALL 66
INSTALLATION RESOURCES**

3. Contractor Workyears.

a. **On-Base Contract Workyear Table.** Provide a projected estimate of the number of contract workyears expected to be performed "on base" in support of the installation during FY 1996. Information should represent an annual estimate on a full-time equivalency basis. Several categories of contract support have been identified in the table below. While some of the categories are self-explanatory, please note that the category "mission support" entails management support, labor service and other mission support contracting efforts, e.g., aircraft maintenance, RDT&E support, technical services in support of aircraft and ships, etc.

Table 3 - Contract Workyears	
Activity Name: NRC LACROSSE, WI	UIC: 62066
Contract Type	FY 1996 Estimated Number of Workyears On-Base
Construction:	
Facilities Support:	
Mission Support:	.1
Procurement:	
Other:*	
Total Workyears:	.1

* **Note:** Provide a brief narrative description of the type(s) of contracts, if any, included under the "Other" category.

**DATA CALL 66
INSTALLATION RESOURCES**

b. Potential Disposition of On-Base Contract Workyears. If the mission/functions of your activity were relocated to another site, what would be the anticipated disposition of the on-base contract workyears identified in Table 3.?

1) Estimated number of contract workyears which would be transferred to the receiving site (This number should reflect the number of jobs which would in the future be contracted for at the receiving site, not an estimate of the number of people who would move or an indication that work would necessarily be done by the same contractor(s)): .1

2) Estimated number of workyears which would be eliminated: 0

3) Estimated number of contract workyears which would remain in place (i.e., contract would remain in place in current location even if activity were relocated outside of the local area): 0

**DATA CALL 66
INSTALLATION RESOURCES**

c. **"Off-Base" Contract Workyear Data.** Are there any contract workyears located in the local community, but not on-base, which would either be eliminated or relocated if your activity were to be closed or relocated? If so, then provide the following information (ensure that numbers reported below do not double count numbers included in 3.a. and 3.b., above):

No. of Additional Contract Workyears Which Would Be Eliminated	General Type of Work Performed on Contract (e.g., engineering support, technical services, etc.)
0	

No. of Additional Contract Workyears Which Would Be Relocated	General Type of Work Performed on Contract (e.g., engineering support, technical services, etc.)
0	

I certify that the information contained herein is accurate and complete to the best of my knowledge and belief.
NEXT ECHELON LEVEL (if applicable)

NAME (Please type or print)

Signature

Title

Date

Activity

I certify that the information contained herein is accurate and complete to the best of my knowledge and belief.
NEXT ECHELON LEVEL (if applicable)

NAME (Please type or print)

Signature

Title

Date

Activity

I certify that the information contained herein is accurate and complete to the best of my knowledge and belief.
MAJOR CLAIMANT LEVEL

T. F. HALL, RADM, USN

NAME (Please type or print)

Signature

COMMANDER NAVAL RESERVE FORCE

Title

Date

COMNAVRESFOR, WASHINGTON, D.C.

Activity

TF Hall

7/14/94

I certify that the information contained herein is accurate and complete to the best of my knowledge and belief.
DEPUTY CHIEF OF NAVAL OPERATIONS (LOGISTICS)
DEPUTY CHIEF OF STAFF (INSTALLATIONS & LOGISTICS)

NAME (Please type or print)

Signature

Title

Date

BRAC-95 CERTIFICATION

I certify that the information contained herein is accurate and complete to the best of my knowledge and belief.

P. M. NIGH

NAME (Please type or print)
DEPUTY CHIEF OF STAFF

Title
CODE 06

Division
FINANCIAL MANAGEMENT

Department
COMMANDER NAVAL RESERVE FORCE

Activity

P. M. Nigh
Signature

7/13/94
Date

I certify that the information contained herein is accurate and complete to the best of my knowledge and belief.
NEXT ECHELON LEVEL (if applicable)

NAME (Please type or print)

Signature

Title

Date

Activity

I certify that the information contained herein is accurate and complete to the best of my knowledge and belief.
NEXT ECHELON LEVEL (if applicable)

NAME (Please type or print)

Signature

Title

Date

Activity

I certify that the information contained herein is accurate and complete to the best of my knowledge and belief.
MAJOR CLAIMANT LEVEL

T. F. HALL, RADM, USN

NAME (Please type or print)

Signature

COMMANDER NAVAL RESERVE FORCE

Title

Date

COMNAVRESFOR, WASHINGTON, D.C.

Activity

TFHall

7/14/94

I certify that the information contained herein is accurate and complete to the best of my knowledge and belief.

DEPUTY CHIEF OF NAVAL OPERATIONS (LOGISTICS)
DEPUTY CHIEF OF STAFF (INSTALLATIONS & LOGISTICS)

W. A. EARNER

NAME (Please type or print)

Signature

Title

Date

WEarn

8/8/94

681

Activity Identification: Please complete the following table, identifying the activity for which this response is being submitted.

Activity Name:	NAVAL RESERVE CENTER, LA CROSSE, WI
UIC:	62066
Major Claimant:	COMMANDER, NAVAL RESERVE FORCE, NEW ORLEANS, LA

General Instructions/Background:

Information requested in this data call is required for use by the Base Structure Evaluation Committee (BSEC), in concert with information from other data calls, to analyze both the impact that potential closure or realignment actions would have on a local community and the impact that relocations of personnel would have on communities surrounding receiving activities. In addition to Cost of Base Realignment Actions (COBRA) analyses which incorporate standard Department of the Navy (DON) average cost factors, the BSEC will also be conducting more sophisticated economic and community infrastructure analyses requiring more precise, activity-specific data. For example, activity-specific salary rates are required to reflect differences in salary costs for activities with large concentrations of scientists and engineers and to address geographic differences in wage grade salary rates.

Questions relating to "Community Infrastructure" are required to assist the BSEC in evaluating the ability of a community to absorb additional employees and functions as the result of relocation from a closing or realigning DON activity.

Due to the varied nature of potential sources which could be used to respond to the questions contained in this data call, a block appears after each question, requesting the identification of the source of data used to respond to the question. To complete this block, identify the source of the data provided, including the appropriate references for source documents, names and organizational titles of individuals providing information, etc. Completion of this "Source of Data" block is critical since some of the information requested may be available from a non-DoD source such as a published document from the local chamber of commerce, school board, etc. Certification of data obtained from a non-DoD source is then limited to certifying that the information contained in the data call response is an accurate and complete representation of the information obtained from the source. Records must be retained by the certifying official to clearly document the source of any non-DoD information submitted for this data call.

ORIGINAL



General Instructions/Background (Continued):

The following notes are provided to further define terms and methodologies used in this data call. Please ensure that responses consistently follow this guidance:

Note 1: Throughout this data call, the term "activity" is used to refer to the DON installation that is the addressee for the data call.

Note 2: Periodically throughout this data call, questions will include the statement that the response should refer to the "area defined in response to question 1.b., (page 3)". Recognizing that in some large metropolitan areas employee residences may be scattered among many counties or states, the scope of the "area defined" may be limited to the sum of:

- those counties that contain government (DoD) housing units (as identified in 1.b.2)), and,
- those counties closest to the activity which, in the aggregate, include the residences of 80% or more of the activity's employees.

Note 3: Responses to questions referring to "civilians" in this data call should reflect federal civil service appropriated fund employees.

1. Workforce Data

a. **Average Federal Civilian Salary Rate.** Provide the projected FY 1996 average gross annual appropriated fund civil service salary rate for the activity identified as the addressee in this data call. This rate should include all cash payments to employees, and exclude non-cash personnel benefits such as employer retirement contributions, payments to former employees, etc.

NO CIVIL SERVICE EMPLOYEES ATTACHED TO THIS COMMAND.

Average Appropriated Fund Civilian Salary Rate:	NA
---	----

Source of Data (1.a. Salary Rate):



b. **Location of Residence.** Complete the following table to identify where employees live. Data should reflect current workforce.

1) **Residency Table.** Identify residency data, by county, for both military and civilian (civil service) employees working at the installation (including, for example, operational units that are homeported or stationed at the installation). For each county listed, also provide the estimated average distance from the activity, in miles, of employee residences and the estimated average length of time to commute one-way to work. For the purposes of displaying data in the table, any county(s) in which 1% or fewer of the activity's employees reside may be consolidated as a single line entry in the table, titled "Other".

County of Residence	State	No. of Employees Residing in County		Percentage of Total Employees	Average Distance From Base (Miles)	Average Duration of Commute (Minutes)
		Military	Civilian			
LA CROSSE	WI	10	0	100%	5	10

- 100%

As discussed in Note 2 on Page 2, subsequent questions in the data call refer to the "area defined in response to question 1.b., (page 3)". In responding to these questions, the scope of the "area defined" may be limited to the sum of: a) those counties that contain government (DoD) housing units (as identified below), and, b) those counties closest to the activity which, in the aggregate, include the residences of 80% or more of the activity's employees.

2) **Location of Government (DoD) Housing.** If some employees of the base live in government housing, identify the county(s) where government housing is located:

NO DOD HOUSING AVAILABLE.

Source of Data (1.b. 1) & 2) Residence Data):

c. **Nearest Metropolitan Area(s).** Identify all major metropolitan area(s) (i.e., population concentrations of 100,000 or more people) which are within 50 miles of the installation. If no major metropolitan area is within 50 miles of the base, then identify the nearest major metropolitan area(s) (100,000 or more people) and its distance(s) from the base.



City	County	Distance from base (miles)
ROCHESTER, MN	OLMSTEAD	80
MADISON, WI	DANE	120
MINNEAPOLIS, MN	HENNEPIN	180

Source of Data (l.c. Metro Areas): RAND MCNALLY 1994 ROAD ATLAS



d. Age of Civilian Workforce. Complete the following table, identifying the age of the activity's civil service workforce.

NO CIVILIANS ATTACHED.

Age Category	Number of Employees	Percentage of Employees
16 - 19 Years		
20 - 24 Years		
25 - 34 Years		
35 - 44 Years		
45 - 54 Years		
55 - 64 Years		
65 or Older		
TOTAL		100 %

Source of Data (1.d.) Age Data:



e. Education Level of Civilian Workforce NO CIVILIANS ATTACHED (QUESTIONS e, f and g)

1) Education Level Table. Complete the following table, identifying the education level of the activity's civil service workforce.

Last School Year Completed	Number of Employees	Percentage of Employees
8th Grade or less	N/A	
9th through 11th Grade		
12th Grade or High School Equivalency		
1-3 Years of College		
4 Years of College (Bachelors Degree)		
5 or More Years of College (Graduate Work)		
TOTAL		100 %

2) Degrees Achieved. Complete the following table for the activity's civil service workforce. Identify the number of employees with each of the following degrees, etc. To avoid double counting, only identify the highest degree obtained by a worker (e.g., if an employee has both a Master's Degree and a Doctorate, only include the employee under the category "Doctorate").

Degree	Number of Civilian Employees
Terminal Occupation Program - Certificate of Completion, Diploma or Equivalent (for areas such as technicians, craftsmen, artisans, skilled operators, etc.)	N/A
Associate Degree	
Bachelor Degree	
Masters Degree	
Doctorate	

Source of Data (1.e.1) and 2) Education Level Data):

f. Civilian Employment By Industry. Complete the following table to identify by "industry" the type of work performed by civil service employees at the activity. The intent of this table is to attempt to stratify the activity civilian workforce using the same categories of industries used to identify private sector employment. Employees should be categorized based on their primary duties. Additional information on categorization of

private sector employment by industry can be found in the Office of Management and Budget Standard Industrial Classification (SIC) Manual. However, you do not need to obtain a copy of this publication to provide the data requested in this table.

Note the following specific guidance regarding the "Industry Type" codes in the first column of the table: Even though categories listed may not perfectly match the type of work performed by civilian employees, please attempt to assign each civilian employee to one of the "Industry Types" identified in the table. However, only use the Category 6, "Public Administration" sub-categories when none of the other categories apply. Retain supporting data used to construct this table at the activity-level, in case questions arise or additional information is required at some future time. Leave shaded areas blank.

Industry	SIC Codes	No. of Civilians	% of Civilians
1. Agriculture, Forestry & Fishing	01-09	N/A	
2. Construction (includes facility maintenance and repair)	15-17		
3. Manufacturing (includes Intermediate and Depot level maintenance)	20-39		
3a. Fabricated Metal Products (include ordnance, ammo, etc.)	34		
3b. Aircraft (includes engines and missiles)	3721 et al		
3c. Ships	3731		
3d. Other Transportation (includes ground vehicles)	various		
3e. Other Manufacturing not included in 3a. through 3d.	various		
Sub-Total 3a. through 3e.	20-39		
4. Transportation/Communications/Utilities	40-49		
4a. Railroad Transportation	40		
4b. Motor Freight Transportation & Warehousing (includes supply services)	42		
4c. Water Transportation (includes organizational level maintenance)	44		
4d. Air Transportation (includes organizational level maintenance)	45		



4e. Other Transportation Services (includes organizational level maintenance)	47	N/A	
4f. Communications	48		
4g. Utilities	49		
Sub-Total 4a. through 4g.	40-49		
5. Services	70-89		
5a. Lodging Services	70		
5b. Personal Services (includes laundry and funeral services)	72		
5c. Business Services (includes mail, security guards, pest control, photography, janitorial and ADP services)	73		
5d. Automotive Repair and Services	75		
5e. Other Misc. Repair Services	76		
5f. Motion Pictures	78		
5g. Amusement and Recreation Services	79		
5h. Health Services	80		
5i. Legal Services	81		
5j. Educational Services	82		
5k. Social Services	83		
5l. Museums	84		
5m. Engineering, Accounting, Research & Related Services (includes RDT&E, ISE, etc.)	87		
5n. Other Misc. Services	89		
Sub-Total 5a. through 5n.:	70-89		
6. Public Administration	91-97		
6a. Executive and General Government, Except Finance	91		

6b. Justice, Public Order & Safety (includes police, firefighting and emergency management)	92	N/A	
6c. Public Finance	93		
6d. Environmental Quality and Housing Programs	95		
Sub-Total 6a. through 6d.			
TOTAL			100 %

Source of Data (1.f) Classification By Industry Data):



g. Civilian Employment by Occupation. Complete the following table to identify the types of "occupations" performed by civil service employees at the activity. Employees should be categorized based on their primary duties. Additional information on categorization of employment by occupation can be found in the Department of Labor Occupational Outlook Handbook. However, you do not need to obtain a copy of this publication to provide the data requested in this table.

Note the following specific guidance regarding the "Occupation Type" codes in the first column of the table: Even though categories listed may not perfectly match the type of work performed by civilian employees, please attempt to assign each civilian employee to one of the "Occupation Types" identified in the table. Refer to the descriptions immediately following this table for more information on the various occupational categories. Retain supporting data used to construct this table at the activity-level, in case questions arise or additional information is required at some future time. Leave shaded areas blank.

Occupation	Number of Civilian Employees	Percent of Civilian Employees
1. Executive, Administrative and Management	N/A	
2. Professional Specialty		
2a. Engineers		
2b. Architects and Surveyors		
2c. Computer, Mathematical & Operations Research		
2d. Life Scientists		
2e. Physical Scientists		
2f. Lawyers and Judges		
2g. Social Scientists & Urban Planners		
2h. Social & Recreation Workers		
2i. Religious Workers		
2j. Teachers, Librarians & Counselors		
2k. Health Diagnosing Practitioners (Doctors)		
2l. Health Assessment & Treating (Nurses, Therapists, Pharmacists, Nutritionists, etc.)		
2m. Communications		
2n. Visual Arts		
Sub-Total 2a. through 2n.:		
3. Technicians and Related Support		



3a. Health Technologists and Technicians	N/A	
3b. Other Technologists		
Sub-Total 3a. and 3b.:		
4. Administrative Support & Clerical		
5. Services		
5a. Protective Services (includes guards, firefighters, police)		
5b. Food Preparation & Service		
5c. Dental/Medical Assistants/Aides		
5d. Personal Service & Building & Grounds Services (includes janitorial, grounds maintenance, child care workers)		
Sub-Total 5a. through 5d.		
6. Agricultural, Forestry & Fishing		
7. Mechanics, Installers and Repairers		
8. Construction Trades		
9. Production Occupations		
10. Transportation & Material Moving		
11. Handlers, Equipment Cleaners, Helpers and Laborers (not included elsewhere)		
TOTAL		100 %



Source of Data (1.g.) Classification By Occupation Data):

Description of Occupational Categories used in Table 1.g. The following list identifies public and private sector occupations included in each of the major occupational categories used in the table. Refer to these examples as a guide in determining where to allocate **appropriated fund civil service jobs** at the activity.

1. **Executive, Administrative and Management.** Accountants and auditors; administrative services managers; budget analysts; construction and building inspectors; construction contractors and managers; cost estimators; education administrators; employment interviewers; engineering, science and data processing managers; financial managers; general managers and top executives; chief executives and legislators; health services managers; hotel managers and assistants; industrial production managers; inspectors and compliance officers, except construction; management analysts and consultants; marketing, advertising and public relations managers; personnel, training and labor relations specialists and managers; property and real estate managers; purchasing agents and managers; restaurant and food service managers; underwriters; wholesale and retail buyers and merchandise managers.
2. **Professional Specialty.** Use sub-headings provided.
3. **Technicians and Related Support.** Health Technologists and Technicians sub-category - self-explanatory. Other Technologists sub-category includes aircraft pilots; air traffic controllers; broadcast technicians; computer programmers; drafters; engineering technicians; library technicians; paralegals; science technicians; numerical control tool programmers.
4. **Administrative Support & Clerical.** Adjusters, investigators and collectors; bank tellers; clerical supervisors and managers; computer and peripheral equipment operators; credit clerks and authorizers; general office clerks; information clerks; mail clerks and messengers; material recording, scheduling, dispatching and distributing; postal clerks and mail carriers; records clerks; secretaries; stenographers and court reporters; teacher aides; telephone, telegraph and teletype operators; typists, word processors and data entry keyers.
5. **Services.** Use sub-headings provided.
6. **Agricultural, Forestry & Fishing.** Self explanatory.
7. **Mechanics, Installers and Repairers.** Aircraft mechanics and engine specialists; automotive body repairers; automotive mechanics; diesel mechanics; electronic equipment repairers; elevator installers and repairers; farm equipment mechanics; general maintenance mechanics; heating, air conditioning and refrigeration technicians; home appliance and power tool repairers; industrial machinery repairers; line installers and cable splicers; millwrights; mobile heavy equipment mechanics; motorcycle, boat and small engine mechanics; musical instrument repairers and tuners; vending machine servicers and repairers.
8. **Construction Trades.** Bricklayers and stonemasons; carpenters; carpet installers; concrete masons and terrazzo workers; drywall workers and lathers; electricians; glaziers; highway maintenance; insulation workers; painters and paperhangers; plasterers; plumbers and pipefitters; roofers; sheet metal workers; structural and reinforcing ironworkers; tilesetters.
9. **Production Occupations.** Assemblers; food processing occupations; inspectors, testers and graders; metalworking and plastics-working occupations; plant and systems operators, printing occupations; textile, apparel and furnishings occupations; woodworking occupations; miscellaneous production operations.
10. **Transportation & Material Moving.** Busdrivers; material moving equipment operators; rail transportation occupations; truckdrivers; water transportation occupations.
11. **Handlers, Equipment Cleaners, Helpers and Laborers** (not included elsewhere). Entry level jobs not requiring significant training.

h. Employment of Military Spouses. Complete the following table to provide estimated information concerning military spouses who are also employed in the area defined in response to question 1.b., above. **Do not fill in shaded area.**

1. Percentage of Military Employees Who Are Married:	50%
2. Percentage of Military Spouses Who Work Outside of the Home:	80%
3. Break out of Spouses' Location of Employment (Total of rows 3a. through 3d. should equal 100% and reflect the number of spouses used in the calculation of the "Percentage of Spouses Who Work Outside of the Home".	
3a. Employed "On-Base" - Appropriated Fund:	Ø
3b. Employed "On-Base" - Non-Appropriated Fund:	Ø
3c. Employed "Off-Base" - Federal Employment:	Ø
3d. Employed "Off-Base" - Other Than Federal Employment	100%

Source of Data (1.h.) Spouse Employment Data):	MILITARY MEMBERS
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2. Infrastructure Data. For each element of community infrastructure identified in the two tables below, rate the community's ability to accommodate the relocation of additional functions and personnel to your activity. Please complete each of the three columns listed in the table, reflecting the impact of various levels of increase (20%, 50% and 100%) in the number of personnel working at the activity (and their associated families). In ranking each category, use one of the following three ratings:

- A - Growth can be accommodated with little or no adverse impact to existing community infrastructure and at little or no additional expense.
- B - Growth can be accommodated, but will require some investment to improve and/or expand existing community infrastructure.
- C - Growth either cannot be accommodated due to physical/environmental limitations or would require substantial investment in community infrastructure improvements.

Table 2.a., "Local Communities": This first table refers to the local community (i.e., the community in which the base is located) and its ability to meet the increased requirements of the installation.

Table 2.b., "Economic Region": This second table asks for an assessment of the infrastructure of the economic region (those counties identified in response to question 1.b., (page 3) - taken in the aggregate) and its ability to meet the needs of additional employees and their families moving into the area.

For both tables, annotate with an asterisk (*) any categories which are wholly supported on-base, i.e., are not provided by the local community. These categories should also receive an A-B-C rating. Answers for these "wholly supported on-base" categories should refer to base infrastructure rather than community infrastructure.



a. Table A: Ability of the local community to meet the expanded needs of the base.

1) Using the A - B - C rating system described above, complete the table below.

Category	20% Increase	50% Increase	100% Increase
Off-Base Housing	A	A	A
Schools - Public	A	A	A
Schools - Private	A	A	A
Public Transportation - Roadways	A	A	A
Public Transportation - Buses/Subways	A	A	A
Public Transportation - Rail	A	A	A
Fire Protection	A	A	A
Police	A	A	A
Health Care Facilities	A	A	A
Utilities:	A	A	A
Water Supply	A	A	A
Water Distribution	A	A	A
Energy Supply	A	A	A
Energy Distribution	A	A	A
Wastewater Collection	A	A	A
Wastewater Treatment	A	A	A
Storm Water Collection	A	A	A
Solid Waste Collection and Disposal	A	A	A
Hazardous/Toxic Waste Disposal	A	A	A
Recreational Activities	A	A	A

Remember to mark with an asterisk any categories which are wholly supported on-base.



2) For each rating of "C" identified in the table on the preceding page, attach a brief narrative explanation of the types and magnitude of improvements required and/or the nature of any barriers that preclude expansion.

NO "C" RATINGS

Source of Data (2.a. 1) & 2) - Local Community Table): LA CROSSE CHAMBER OF COMMERCE



b. Table B: Ability of the region described in the response to question 1.b. (page 3) (taken in the aggregate) to meet the needs of additional employees and their families relocating into the area.

1) Using the A - B - C rating system described above, complete the table below.

Category	20% Increase	50% Increase	100% Increase
Off-Base Housing	A	A	A
Schools - Public	A	A	A
Schools - Private	A	A	A
Public Transportation - Roadways	A	A	A
Public Transportation - Buses/Subways	A	A	A
Public Transportation - Rail	A	A	A
Fire Protection	A	A	A
Police	A	A	A
Health Care Facilities	A	A	A
Utilities:	A	A	A
Water Supply	A	A	A
Water Distribution	A	A	A
Energy Supply	A	A	A
Energy Distribution	A	A	A
Wastewater Collection	A	A	A
Wastewater Treatment	A	A	A
Storm Water Collection	A	A	A
Solid Waste Collection and Disposal	A	A	A
Hazardous/Toxic Waste Disposal	A	A	A
Recreation Facilities	A	A	A

Remember to mark with an asterisk any categories which are wholly supported on-base.



2) For each rating of "C" identified in the table on the preceding page, attach a brief narrative explanation of the types and magnitude of improvements required and/or the nature of any barriers that preclude expansion.

NO "C" RATINGS ASSIGNED

Source of Data (2.b. 1) & 2) - Regional Table): LA CROSSE CHAMBER OF COMMERCE



3. Public Facilities Data:

a. **Off-Base Housing Availability.** For the counties identified in the response to question 1.b. (page 3), in the aggregate, estimate the current average vacancy rate for community housing. Use current data or information identified on the latest family housing market analysis. For each of the categories listed (rental units and units for sale), combine single family homes, condominiums, townhouses, mobile homes, etc., into a single rate:

Rental Units: 10,000 (WITH AN AVERAGE VACANCY RATE APPROXIMATELY 1000 UNITS)
10%

Units for Sale: 12,672 UNITS (WITH 398 UNITS CURRENTLY VACANT (3%))
3%

Source of Data (3.a. Off-Base Housing):

RENTAL UNITS: LA CROSSE RENTAL DIRECTORY

UNITS FOR SALE: LA CROSSE BOARD OF REALTORS AND
STATISTICAL SUMMARY OF MLS LISTINGS
CITY OF LA CROSSE'S ASSESSOR'S OFFICE



b. Education.

1) Information is required on the current capacity and enrollment levels of school systems serving employees of the activity. Information should be keyed to the counties identified in the response to question 1.b. (page 3).

School District	County	Number of Schools			Enrollment		Pupil-to-Teacher Ratio		Does School District Serve Gov't Housing Units?
		Elementary	Middle	High	Current	Max. Capacity	Current	Max. Ratio	
LA CROSSE	LA CROSSE	11	3	2	8000	10000	1-22	1-24	NO

* Answer "Yes" in this column if the school district in question enrolls students who reside in government housing.

Source of Data (3.b.1) Education Table): LA CROSSE BOARD OF EDUCATION

2) Are there any on-base "Section 6" Schools? If so, identify number of schools and current enrollment.

NO ON-BASE SCHOOLS

Source of Data (3.b.2) On-Base Schools):



3) For the counties identified in the response to question 1.b. (page 3), in the aggregate, list the names of undergraduate and graduate colleges and universities which offer certificates, Associate, Bachelor or Graduate degrees :

UNIVERSITY OF WISCONSIN-LA CROSSE
VITERBO COLLEGE
WESTERN WISCONSIN TECHNICAL COLLEGE (ASSOCIATE ONLY)

Source of Data (3.b.3) Colleges): LA CROSSE BOARD OF EDUCATION

4) For the counties identified in the response to question 1.b. (page 3), in the aggregate, list the names and major curriculums of vocational/technical training schools:

WESTERN WISCONSIN TECHNICAL COLLEGE

HEALTH OCCUPATIONS
HUMAN RESOURCES
BUSINESS EDUCATION
INDUSTRIAL EDUCATION

Source of Data (3.b.4) Vo-tech Training): LA CROSSE BOARD OF EDUCATION



c. **Transportation.**

1) Is the activity served by public transportation?

	<u>Yes</u>	<u>No</u>
Bus:	<u>X</u>	—
Rail:	<u>X</u>	—
Subway:	—	<u>X</u>
Ferry:	—	<u>X</u>

Source of Data (3.c.1) Transportation):

LA CROSSE DEPARTMENT OF TRANSPORTATION

of the nearest passenger rail station.

2) Identify the location of

THE CITY OF LA CROSSE HAS THE CITY TRANSIT BUS AUTHORITY WHICH SERVES PUBLIC WITH LOW COST BUS TRANSPORTATION

THE CITY ALSO HAS THE AMTRACK TRAIN SYSTEM SERVING LOW COST RAIL TRANSPORTATION. (THREE MILES FROM THE CENTER)

Source of Data (3.c.2) Transportation):

LA CROSSE DEPARTMENT OF TRANSPORTATION

3) Identify the name and location of the nearest commercial airport (with public carriers, e.g., USAIR, United, etc.) and the distance from the activity to the airport.

THE LA CROSSE AIRPORT IS A CENTRALLY LOCATED COMMERCIAL AIRPORT SERVING LA CROSSE AND THE SURROUNDING COMMUNITIES.

DISTANCE FROM THE RESERVE CENTER IS 10 MILES.



Source of Data (3.c.3) Transportation: LA CROSSE DEPARTMENT OF TRANSPORTATION

4) How many carriers are available at this airport?

THREE CARRIERS - AMERICAN, MIDWEST AND NORTHWEST

Source of Data (3.c.4) Transportation: LA CROSSE AIRPORT (MUNICIPAL)



5) What is the Interstate route number and distance, in miles, from the activity to the nearest Interstate highway?

INTERSTATE 90. 10 MILES FROM THE RESERVE ACTIVITY

Source of Data (3.c.5) Transportation): LOCAL CITY MAP

6) Access to Base:

a) Describe the quality and capacity of the road systems providing access to the base, specifically during peak periods. (Include both information on the area surrounding the base and information on access to the base, e.g., numbers of gates, congestion prob

THE ROAD SYSTEM PROVIDES EXCELLENT ACCESS TO THE RESERVE ACTIVITY

b) Do access roads transit residential neighborhoods?

THE RESERVE ACTIVITY IS LOCATED IN A RESIDENTIAL AREA.

c) Are there any easements that preclude expansion of the access road system?

NO EASEMENTS THAT PRECLUDE EXPANSION

d) Are there any man-made barriers that inhibit traffic flow (e.g., draw bridges, etc.)?

NO BARRIERS

Source of Data (3.c.6) Transportation): LA CROSSE DEPARTMENT OF TRANSPORTATION



d. **Fire Protection/Hazardous Materials Incidents.** Does the activity have an agreement with the local community for fire protection or hazardous materials incidents? Explain the nature of the agreement and identify the provider of the service.

THE RESERVE ACTIVITY HAS AN AGREEMENT WITH THE CITY OF LA CROSSE AND IS LOCATED NEXT DOOR TO THE CITY FIRE DEPARTMENT.

Source of Data (3.d. Fire/Hazmat): CITY OF LA CROSSE FIRE DEPARTMENT

e. **Police Protection.**

1) What is the level of legislative jurisdiction held by the installation?

CONCURRENT

2) If there is more than one level of legislative jurisdiction for installation property, provide a brief narrative description of the areas covered by each level of legislative jurisdiction and whether there are separate agreements for local law enforcement protection.

NONE

3) Does the activity have a specific written agreement with local law enforcement concerning the provision of local police protection?

THERE IS NO SPECIFIC WRITTEN AGREEMENT WITH LOCAL LAW ENFORCEMENT.

4) If agreements exist with more than one local law enforcement entity, provide a brief narrative description of whom the agreement is with and what services are covered.

NA

5) If military law enforcement officials are routinely augmented by officials of other federal agencies (BLM, Forest Service, etc.), identify any written agreements covering such services and briefly describe the level of support received.

NO MILITARY LAW ENFORCEMENT OFFICIALS

Source of Data (3.e. 1) - 5) - Police): LA CROSSE POLICE DEPARTMENT

KURFOB



f. Utilities.

1) Does the activity have an agreement with the local community for water, refuse disposal, power or any other utility requirements? Explain the nature of the agreement and identify the provider of the service. NRC LACROSSE IS UNDER CONTRACT WITH NORTHERN STATES POWER COMPANY, THEY PROVIDE NATURAL GAS AND ELECTRIC. LACROSSE WATER AND UTILITY PROVIDES WATER AND SEWAGE SERVICES. REFUSE DISPOSAL IS PROVIDED UNDER CONTRACT WITH MODERN CLEAN UP SERVICE OF LACROSSE.

2) Has the activity been subject to water rationing or interruption of delivery during the last five years? If so, identify time period during which rationing existed and the restrictions imposed. Were activity operations affected by these situations? If so, explain extent of impact.

NO RESTRICTIONS.

3) Has the activity been subject to any other significant disruptions in utility service, e.g., electrical "brown outs", "rolling black outs", etc., during the last five years? If so, identify time period(s) covered and extent/nature of restrictions/disruption. Were activity operations affected by these situations? If so, explain extent of impact.

NONE

Source of Data (3.f. 1) - 3) Utilities): GREAT LAKES FACILITIES CONTRACTING OFFICE

4. **Business Profile.** List the top ten employers in the geographic area defined by your response to question 1.b. (page 3), taken in the aggregate, (include your activity, if appropriate):

Employer	Product/Service	No. of Employees
1. TRANE CO	AIR COND/COMM ENERGY MGMT	2577
2. LUTHERAN HOSP	HEALTH CARE	1716
3. ST FRANCIS MED. CENTER	HEALTH CARE	1414
4. GUNDERSON CLINIC	HEALTH CARE	1304
5. GATEWAY FOODS, INC	WHSLE GROCERY DISTRIBUTOR	1086
6. G. HEILEMAN BREWERY	BREWING	1050
7. LA CROSSE COUNTY	GOVERNMENT	1032
8. LA CROSSE SCHOOL DISTRICT	EDUCATION	942
9. UNIV WISC-LA CROSSE	EDUCATION	750
10. DAIRYLAND POWER	ELECTRICITY	720

Source of Data (4. Business Profile): LA CROSSE CHAMBER OF COMMERCE



5. **Other Socio-Economic Impacts.** For each of the following areas, describe other recent (past 5 years), on-going or projected economic impacts (both positive and negative) on the geographic region defined by your response to question 1.b. (page 3), in the aggregate:

a. **Loss of Major Employers:**

NO MAJOR EMPLOYERS HAVE LEFT AREA IN LAST FIVE YEARS. G. HEILMAN BREWING COMPANY INC COMPLETED A MAJOR REORGANIZATION AND FACED BANKRUPTCY IN 1990-91, BUT HAS NOW RECOVERED. SECONDLY, PECISION TECHNOLOGIES IS CURRENTLY UNDER RESTRUCTURING (125 EMPLOYEES)

b. **Introduction of New Businesses/Technologies:**

HEALTH CARE, WITH 2 MAJOR HOSPITAL - CLINICS, HAS EXPANDED AS HAS THE RETAIL BUSINESS WITH 2 SHOPPING CENTERS AT NORTH AND SOUTH END OF TOWN

c. **Natural Disasters:**

NONE, ALTHOUGH THE DROUGHT IN 1988 SIGNIFICANTLY HURT CASH CROPS IN THE AREA AND THE MISSISSIPPI RIVER FLOODING OF 1993 HOWEVER SIGNIFICANT DID NO DAMAGE IN THE LA CROSSE REGION.

d. **Overall Economic Trends:**

SLOW CONTROLLED GROWTH

Source of Data (5. Other Socio/Econ): MR. GASTERLAND, PRESIDENT COULEE STATE BANK AND CHAIRMAN OF MILITARY AFFAIRS COMMITTEE. LACROSSE CHAMBER OF COMMERCE

6. **Other.** Identify any contributions of your activity to the local community not discussed elsewhere in this response.

THE RESERVE ACTIVITY STAFF AND SELECTED RESERVISTS VOLUNTEED TIME AND EXPERTISE DURING THE 1993 MISSISSIPPI RIVER FLOODING, WORKING SIDE BY SIDE WITH THE RED CROSS

Source of Data (6. Other): LA CROSSE RED CROSS CHAPTER



BRAC-95 CERTIFICATION

Reference: SECNAVNOTE 11000 of 08 December 1993

In accordance with policy set forth by the Secretary of the Navy, personnel of the Department of the Navy, uniformed and civilian, who provide information for use in the BRAC-95 process are required to provide a signed certification that states "I certify that the information contained herein is accurate and complete to the best of my knowledge and belief." The signing of this certification constitutes a representation that the certifying official has reviewed the information and either (1) personally vouches for its accuracy and completeness or (2) has possession of, and is relying upon, a certification executed by a competent subordinate.

Each individual in your activity generating information for the BRAC-95 process must certify that information. Enclosure (1) is provided for individual certifications and may be duplicated as necessary. You are directed to maintain those certifications at your activity for audit purposes. For purposes of this certification sheet, the commander of the activity will begin the certification process and each reporting senior in the Chain of Command reviewing the information will also sign this certification sheet. This sheet must remain attached to this package and be forwarded up the Chain of Command. Copies must be retained by each level in the Chain of Command for audit purposes.

I certify that the information contained herein is accurate and complete to the best of my knowledge and belief.

ACTIVITY COMMANDER

PETTY, GARY T. PNC
NAME (Please type or print)


Signature

COMMANDING OFFICER (ACTING)
Title

29 JUL 94
Date

NRC LA CROSSE WI
Activity

anl: Chief of Naval Operations (N095)
2000 Navy Pentagon
Washington, DC 20350-2000



I certify that the information contained herein is accurate and complete to the best of my knowledge and belief.

NEXT ECHELON LEVEL (if applicable)

S. D. BARRETT, CAPT, USNR
NAME (Please type or print)


Signature

COMMANDER
Title

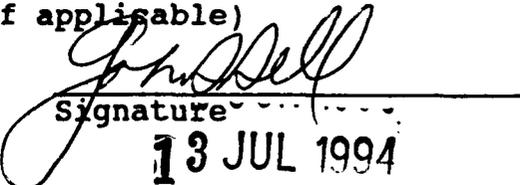
7 July 1994
Date

NAVAL RESERVE READINESS COMMAND REGION SIXTEEN
Activity

I certify that the information contained herein is accurate and complete to the best of my knowledge and belief.

NEXT ECHELON LEVEL (if applicable)

JOHN B. BELL, CAPT, USNR
NAME (Please type or print)
COMMANDER - ACTING
T: COMNAVSURFRESFOR

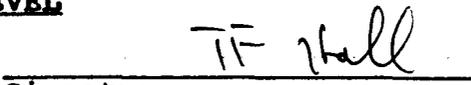

Signature
13 JUL 1994
Date

Activity

I certify that the information contained herein is accurate and complete to the best of my knowledge and belief.

MAJOR CLAIMANT LEVEL

T. F. HALL
NAME (Please type or print)


Signature

Commander, Naval Reserve Force
Title 4400 Dauphine St.
New Orleans, LA 70146

7/25/94
Date

Activity

