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DATA CALL 66
INSTALLATION RESOURCES

Activity Information:

Activity Name:	N&MCRC BILLINGS, MT
UIC:	62138
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

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: N&MCRC BILLINGS, MT		**UIC:** 62138	
Category	**FY 1996 BOS Costs ($000)**		
	Non-Labor	**Labor**	**Total**
1. Real Property Maintenance Costs:			
1a. Maintenance and Repair	39		39
1b. Minor Construction			
1c. Sub-total 1a. and 1b.	39		39
2. Other Base Operating Support Costs:			
2a. Utilities	12		12
2b. Transportation			
2c. Environmental			
2d. Facility Leases			
2e. Morale, Welfare & Recreation			
2f. Bachelor Quarters			
2g. Child Care Centers			
2h. Family Service Centers			
2i. Administration	26		26
2j. Other (Specify) - Basecomm	8		8
2k. Sub-total 2a. through 2j:	46		46
3. Grand Total (sum of 1c. and 2k.):	85		85

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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:

Appropriation	Amount ($000)
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

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N/A

Table 1B - Base Operating Support Costs (DBOF Overhead)			
Activity Name: N&MCRC BILLINGS, MT		**UIC:** 62138	
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: N&MCRC BILLINGS, MT	**UIC:** 62138

Cost Category	FY 1996 Projected Costs ($000)
Travel:	4
Material and Supplies (including equipment):	25
Industrial Fund Purchases (other DBOF purchases):	7
Transportation:	
Other Purchases (Contract support, etc.):	49
Total:	85

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: N&MCRC BILLINGS, MT	**UIC:** 62138
Contract Type	**FY 1996 Estimated Number of Workyears On-Base**
Construction:	
Facilities Support:	
Mission Support:	.3
Procurement:	
Other:*	
Total Workyears:	.3

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

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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)): .3

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: T F Hall

COMMANDER NAVAL RESERVE FORCE

Title

Date: 7/14/94

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)

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)

P. M. Nigh

Signature

DEPUTY CHIEF OF STAFF

Title

7/13/94

Date

CODE 06

Division

FINANCIAL MANAGEMENT

Department

COMMANDER NAVAL RESERVE FORCE

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.

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: TF Hall

COMMANDER NAVAL RESERVE FORCE

Title

Date: 7/14/94

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: W A Earner

Title _____

Date: 8/8/94

DATA CALL 63
FAMILY HOUSING DATA

724

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

Installation Name:	NMCRC Billings
Unit Identification Code (UIC):	N62138
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)

Signature

COMMANDER
Title

7/20/94
Date

NAVAL FACILITIES ENGINEERING COMMAND
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

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)

Signature

CAPT. CEC, USN
COMMANDING OFFICER
Title

27 June 1994
Date

SOUTHNAVFACENGCOM
Activity

Enclosure (1)

BRAC-95 CERTIFICATION

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

YVONNE O. SPRING
NAME (Please type or print)

Signature

Housing Management Specialist
Title

27 June 1994
Date

Housing Division
Division

Facilities Management Dept.
Department

SOUTHNAVFACENCON
Activity

Enclosure (1)

#11

724

MILITARY VALUE ANALYSIS:
DATA CALL WORK SHEET FOR
RESERVE CENTER: NAVMARCORESCEN BILLINGS MT
ACTIVITY UIC: 62138

ORIGINAL

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

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

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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

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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.

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MISSION REQUIREMENTS

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

CURRENT MISSIONS:

- Conduct training and support the execution of training by assigned personnel and equipment in a state of readiness which will permit rapid employment in the event of partial or full mobilization

- Manage assigned resources, and provide administrative and logistic support to assigned reserve units and reservists.

- Provide Casualty Assistance Calls Officers for notification of next of kin in the Montana/Wyoming/North Dakota areas.

- Act as emergency shelter in event of natural disaster if directed by higher authority.

- Provide administrative and facilities support for Reserve Recruiting.

- Provide administrative services and support to local active duty and retired personnel to include ID Cards, DEERS enrollment, and CHAMPUS information.

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UIC: 62138

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 x 48 x 16 = 3840.

Purpose of Utilization	Student Throughput	# of Uses	Drill Space Utilized	Facility (space) Hours
Instruction	2880	36	5 classrooms	16
Insstruction/PBFT/Co Call	144	36	Conference Room	4
Quarters/GMT	108	36	Drill Hall	3
Rescen Maintenance	108	36	Shop Area	3
Weapons Storage	96	12	Armory (USMC)	8

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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.). None

INSTRUCTION	FREQUENCY OF INSTRUCTION	METHOD OF INSTRUCTION

62138

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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.

None

INSTRUCTION	FREQUENCY OF INSTRUCTION PER YR.	METHOD OF INSTRUCTION

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.

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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
NRMTF PS 922	USNR	83156	12		
NMCB 18 DET 0618	USNR	85182	39		
SIMA PH DET 222	USNR	87889	38		
4THMAR DIV COB	USNR	88518	4		
SUPDET YOKO	USNR	89530	18		
FH 500 CBTZ 9	USNR	89782	39		
ACDU STAFF	USNR	62138		6	0
I & I STAFF	USMC	87248		8	0
4THMAR DIV COB	USMCR	14703		80	
VTU 2201	USNR	2201G	3		

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
NONE	

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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	SITE		
(Navy or Marine Corps	Reserve Command/Center	Gaining Command	Other Site
NRMTF PS 922	60%	40%	
SIMA PH DET 222	60%	30%	10%
SUPDET YOKO DET A122	40%	40%	20%
FH 500 CBTZ 9 DET A	70%	30%	
NMCB 18 DET 0618	90%	10%	
4THMARDIV CO B	75%	25%	

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.

40 - EXPORTABLE TRAINING/TAD PERSONNEL

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.

N/A

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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	82	23	25

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

Name of Center	miles
ARMY RESERVE CENTER, BILLINGS, MT	5
MONTANA NATIONAL GUARD, BILLINGS, MT	5

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

Name of Center	miles
MONTANA NATIONAL GUARD, HARLOWTON, MT	110

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
NAVRESCEN GREAT FALLS, MT	220	NONE
NAVRESCEN MISSOULA, MT	350	NONE

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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.

NATIONAL GUARD ARMORY, BILLINGS, MT
ARMY RESERVE CENTER, BILLINGS, MT

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	10

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.)

Small population center/Billings only major city within 200 mile radius in all directions.

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.)

Billings is largest city in Montana and nearest city with approximate same population is over 500 miles away.

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

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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.

YES/Disaster assistance with regards to food distribution, emergency shelter, and communications with emphasis on shelter

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.)

Honor Guards/Funeral details as requested/Color Guards as requested

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	45	1500						
Classrooms	45	2100						
Trainers								
Labs								
Shops								
Bays								
Storage	45	2300 X						
Supply	45	680						
Pistol Range (# of Facilities)								
Other Ranges (Specify) (# of Facilities)								
Armory	45	650						
Parking - POV (Sq. Yds. (SY))		1200 X						
Parking - Organizational Vehicles (SY)		270 X						
Land (Acres)		1.02 X						
Other (Specify)						1.1		2

* All spaces are upgraded via self-help projects

Corrections made AF Reserve CTT

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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
Classrooms	2702	X		
Drill Hall	2800	X		
Conference Room	300	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?

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4. List the location of space outside of the Reserve Command/Center utilized for drilling, if any, by Category Code Number CCN, as described in NAVFAC P-80, and the condition of those resources.

CCN:	Adequate	Substandard	Inadequate
NONE			
Total			

5. 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?

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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	2	1,000			13,000	14,000
B						
C						
D						
E						
F						
G						

SF----------Provide gross square feet
General Space-Includes office, storage, work benches and toilets

Unit Type	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

Pg __ of __
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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?

N/A NO OTHER TRAINING BUILDINGS

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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.**

CCN	Training Facilities	Number of Facilities N/A		
		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?

This facility is not a weapons training facility

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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
N/A			

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

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

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 (ft3)	Estimated Down Time
N/A				

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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.).

N/A

Potential Area	Unusable Acres	Reason Unusable

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.).

N/A

Training Area	Limitation(s) on Use or Availability

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

N/A	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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Indicate the additional controls required if the pier is inside a Controlled Industrial Area or High Security Area. Provide the average number of days per year over the last eight years that the pier was out of service (OOS) because of maintenance, including dredging of the associated slip:

N/A NO PIER OR WHARF FACILITIES

Table 11.1

Pier/ Wharf & Age1	CCN2	Moor Length (ft)	Design Dredge Depth3 (ft) (MLLW)	Slip Width4 (ft)	Pier Width (ft)5	CIA/Security Area? (Y/N)6	ESQD Limit 7	# Days OOS for maint.

1Original age and footnote a list of MILCON improvements in the past 10 years.
2Use NAVFAC P-80 for category code number.
3Comment if unable to maintain design dredge depth
4Water distance between adjacent finger piers.
5Indicate if RO/RO and/or Aircraft access. Indicate if pier structures limit open pier space.
6Describe the additional controls for the pier.
7Net explosive weight. List all ESQD waivers that are in effect with expiration date.

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16. For each **Pier/Wharf** at your facility list the following **ship support characteristics:**

N/A

Table 12.1

Pier/ Wharf	OPNAV 3000.8 (Y/N)	Shore Pwr (KVA) & 4160V (KVA)	Comp. Air Press. & Capacity1	Potable Water (GPD)	CHT (GPD)	Oily Waste1 (gpd)	Steam (lbm/hr & PSI)2	Fendering limits3

1List only permanently installed facilities.
2Indicate if the steam is certified steam.
3Describe any permanent fendering arrangement limits on ship berthing.

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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.

N/A None

Table 13.1

Pier/ Wharf	Typical Steady State Loading1	Ship Berthing Capacity	Ordnance Handling Pier Capacity2	IMA Maintenance Pier Capacity3

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.

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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 realingnments***, state the expected normal **loading**, the maximum capacity for berthing, maximum capacity for weapons handling evolutions, and maximum capacity to conduct intermediate maintenance.

N/A None

Table 14.1

Pier/ Wharf	Typical Steady State Loading1	Ship Berthing Capacity	Ordnance Handling Pier Capacity2	IMA Maintenance Pier Capacity3

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.

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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.

N/A NO PIER SPACE AVAILABLE

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.

N/A NO FACILITIES

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.

N/A

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

N/A NO FACILITIES AVAILABLE

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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:

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	
	N/A NO ORDNANCE STOWAGE FACILITIES AVAILABLE					
	TONS	SQ FT	TONS	SQ FT	TONS	SQ FT
TOTAL						

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1.2For 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); transhipment/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 N/A	Currently Stowed Commodity Type(s)	Reason for Stowage at your Activity	Commodity Type(s) Which Can Be Stowed

Additional comments:

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1.3 Identify the rated category, rated NEW and status of ESQD arc for each stowage facility listed above.

N/A

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

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Location

1. Proximity to Reservists.

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

Over one-third of assigned SELRES travel over 50 miles. No other naval facilities in this area. Nearest NAVRES facilities not already slated for closure from BRAC-93 are Fargo, ND and Cheyenne, WY (both over 500 miles).

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

Local personnel: 5 - 30 minutes
Wyoming personnel: 1 - 2 hours
Outlying Montana personnel: 2 - 6 hours

2. Proximity to Transportation Nodes.

How far are the nearest air, rail, sea and ground transportation nodes?

Billings International Airport - 5 miles
AMTRAC Train Depot (nearest) - 200 miles
Greyhound Bus Depot - 2 miles

3. Proximity to Mobilization Sites.

What is the importance of your location given your mobilization requirements?

Local LSMP provides for prompt mobilization. Our proximity neither improves or impedes command's mobilization ability.

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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?

None/0%

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

None/0%

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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

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

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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.

Expansion could be accomplished by increasing number of drill weekends per month if number of personnel assigned warranted such an increase.

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

None/ Reserve Center located in residential area and is surrounded by a city park

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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: _____

N/A NO AREAS TO DEVELOP

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.)

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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

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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:

N/A

Type of Quarters	Number of Bedrooms	Total number of units	Number Adequate	Number Substandard	Number Inadequate
Officer	4+				
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?

N/A NO MILITARY HOUSING AVAILABLE

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Features and Capabilities

F. Quality of Life (cont.) N/A

(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		
	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+		

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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	N/A
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)?

N/A

(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?

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Features and Capabilities

F. Quality of Life (cont.)

(b) BEQ:

(1) Provide the utilization rate for BEQs for FY 1993. N/A NO BEQ OR BOQ 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?

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

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

N/A

(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.)			
Spouse Employment (non-military)			
Other			
TOTAL		100	

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

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Features and Capabilities

F. Quality of Life (cont.)

(c) BOQ: N/A

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

N/A

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:

N/A

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

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

N/A

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?

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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.

N/A NO FACILITIES AVAILABLE

LOCATION_____ **DISTANCE**_____

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		

N/A

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

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Features and Capabilities

F. Quality of Life (cont.)

4. Base Family Support Facilities and Programs

N/A NO CHILD CARE FACILITIES AVAILABLE

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						
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).

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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. NO BASE FACILITIES AVAILABLE

N/A

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)
CHEYENNE, WY	500
FARGO, ND	600
SPOKANE, WA	600

Features and Capabilities

C. Quality of Life (cont.)

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6. Standard Rate VHA Data for Cost of Living:

Paygrade	With Dependents	Without Dependents
E1	77.97	43.63
E2	77.97	49.03
E3	61.77	45.52
E4	81.80	57.09
E5	104.59	73.02
E6	116.13	79.05
E7	131.77	91.54
E8	121.43	91.80
E9	117.26	89.01
W1	124.88	94.84
W2	112.38	88.14
W3	124.77	101.43
W4	130.61	115.80
O1E	117.02	86.80
O2E	106.86	85.19
O3E	127.99	108.28
O1	74.76	55.09
O2	83.80	65.50
O3	102.82	86.57
O4	110.82	96.37
O5	108.24	89.52
O6	95.99	79.45
O7	23.57	19.15

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

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March 1994.

Type Rental	Average Monthly Rent		Average Monthly Utilities Cost
	Annual High	Annual Low	
Efficiency	$350	$150	$50
Apartment (1-2 Bedroom)	$600	$350	$100
Apartment (3+ Bedroom)	$700	$425	$100
Single Family Home (3 Bedroom)	$1000	$550	$100
Single Family Home (4+ Bedroom)	$1250	$800	$125
Town House (2 Bedroom)	$750	$395	$50
Town House (3+ Bedroom)	$900	$450	$100
Condominium (2 Bedroom)	$900	$450	$100
Condominium (3+ Bedroom)	$1000	$500	$100

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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%
Apartment (1-2 Bedroom)	90%
Apartment (3+ Bedroom)	95%
Single Family Home (3 Bedroom)	97%
Single Family Home (4+ Bedroom)	97%
Town House (2 Bedroom)	90%
Town House (3+ Bedroom)	95%
Condominium (2 Bedroom)	90%
Condominium (3+ Bedroom)	95%

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

Type of Home	Median Cost
Single Family Home (3 Bedroom)	$75 - $85,000
Single Family Home (4+ Bedroom)	$75 - $150,000
Town House (2 Bedroom)	$50 - $75,000
Town House (3+ Bedroom)	$60 - $90,000
Condominium (2 Bedroom)	$50 - $60,000
Condominium (3+ Bedroom)	$60 - $90,000

Features and Capabilities

F. Quality of Life (cont.)

62138

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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
N/A		

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)
PARK CITY, MT	20	30	30
LAUREL, MT	20	10	20
BILLINGS, MT	60	3-8	15

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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 Cost per Student	1993 Avg SAT/ACT Score	% HS Grad to Higher Educ	Source of Info	
PONDERSOSA ELEMENTARY SCHOOL	PUBLIC	PRIMARY 1 - 5	NO	Ø			PHONCON SCHOOL DISTRICT	6/23
RIVERSIDE JUNIOR HIGH SCHOOL	PUBLIC	SECONDARY 6 - 8	YES *	Ø			PHONCON SCHOOL DISTRICT	6/2
BILLINGS SKYVIEW HIGH SCHOOL	PUBLIC	9 - 12	YES *	Ø	10/3/22	50%	PHONCON SCHOOL COUNSELOR	6/2
BILLINGS WEST HIGH SCHOOL	PUBLIC	9 - 12	YES *	Ø	977/22	60%	PHONCON SCHOOL COUNSELOR	6/23

* ACCOMODATE PHYSICALLY CHALLANGED STUDENTS.

N22138 NMCRC BILLINGS

OPTIONAL FORM 99 (7-90)

62138

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	
MAY TECHNICAL COLLEGE	Day YES	NO	YES			
	Night YES	NO	YES			
BILLINGS BUSINESS COLLEGE	Day YES	NO	YES			
	Night YES	NO	YES			
BILLINGS VOCATIONAL TECHNICAL CENTER	Day YES	NO	YES			
	Night YES	NO	YES			
EASTERN MONTANA COLLEGE	Day YES	NO	NO		YES	YES
	Night YES	NO	NO		YES	YES
BILLINGS PUBLIC SCHOOLS ADULT EDUCATION	YES	YES	YES	NO	NO	NO
	YES	YES	YES	NO	NO	NO

N62138 NMCRC BILLINGS

G-2138

Features and Capabilities

N/A

F. Quality of Life (cont.)

NO ON-BASE EDUCATIONAL FACILITIES AVAILABLE.

(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	
	Day					
	Night					
	Corres-pondence					
	Day					
	Night					
	Corres-pondence					
	Day					
	Night					
	Corres-pondence					
	Day					
	Night					
	Corres-pondence					

N62138 NMCRC BILLINGS

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Features and Capabilities

N/A

F. Quality of Life (cont.)

11. Spousal Employment Opportunities

NO FAMILY SERVICE CENTER AVAILABLE.

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				
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 - ACDU PERSONNEL CAN BE SEEN BY LOCAL DOCTORS/DENTISTS AND COST IS PAID BY OMA (SAME FOR REQUIRED PRESCRIPTIONS)

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 - MOST DOCTORS/DENTISTS IN THE LOCAL AREA ACCEPT CHAMPUS AND DELTA DENTAL

62138

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Features and Capabilities
F. Quality of Life (cont.)

N/A

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			
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			

No criminal activity last 3 years involving command personnel.

62138

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Features and Capabilities N/A

F. Quality of Life (cont.)

Crime Definitions	FY 1991	FY 1992	FY 1993
5. Customs (6M)			
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			

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Features and Capabilities N/A

F. Quality of Life (cont.)

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			

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Features and Capabilities N/A

F. Quality of Life (cont.)

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			

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Features and Capabilities N/A

F. Quality of Life (cont.)

Crime Definitions	FY 1991	FY 1992	FY 1993
18. Narcotics (7N)			
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			

62138

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Features and Capabilities N/A

F. Quality of Life (cont.)

Crime Definitions	FY 1991	FY 1992	FY 1993
22. Sex Abuse - Child (8B)			
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			

62138

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BRAC-95 CERTIFICATION

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

J. R. GLUHM
NAME (Please type or print)

Signature

TRAINING OFFICER (ACTING CO)
Title

16 JUN 94
Date

Division

Department

NAVMARCORESCEN BILLINGS MT
Activity

4607 COPIES

Data Call 49 Activity: NMRC Billings, MT

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

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

NEXT ECHELON LEVEL (if applicable)

CAPT. S.M. BROOKER
NAME (Please type or print)

Signature

COMMANDER, ACTING
Title

6/18/94
Date

NAVAL RESERVE READINESS
COMMAND REGION TWENTY-TWO
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

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
NAME (Please type or print)

Signature

Title

7/5/94
Date

Activity

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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. R. GLUHM
NAME (Please type or print)

Signature

TRAINING OFFICER (ACTING CO)
Title

16 JUN 94
Date

NAVMARCORESCEN BILLINGS MT
Activity

4607 COPIES

734

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 & Marine Corps Reserve Center, Billings, MT
Acronym(s) used in correspondence	NAVMARCORESCEN Billings, MT
Commonly accepted short titles	NMCRC Billings, MT

* Complete mailing address: Commanding Officer
NAVMARCORESCEN
717 North 22nd Street
Billings, MT 59101-0398

* PLAD: NAVMARCORESCEN BILLINGS MT

* PRIMARY UIC: 62138 (Plant Account UIC for Plant Account Holders) Enter this number as the Activity identifier at the top of each Data Call response page.

* ALL OTHER UIC(s): N/A PURPOSE: N/A

2. PLANT ACCOUNT HOLDER:
* Yes X No ___ (check one)

Activity: _62138__

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 _X_ 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 _X_ (check one)

Primary Host (current) UIC: _N/A___

Primary Host (as of 01 Oct 1995) UIC: _N/A___

Primary Host (as of 01 Oct 2001) UIC: _N/A___

* **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 _X_ (check one)

Activity: 62138

Data Call 1: General Installation Information, continued

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.

Name	Location	UIC
N/A	N/A	N/A

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

Name	UIC	Location	Host name	Host UIC
N/A	N/A	N/A	N/A	N/A

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.

NMCRC Billings was on the original BRAC-93 Closure List. However, NMCRC Billings was taken off and not included on the final list published in July 1993. Because of closure possibility, recruiting efforts suffered greatly and retention percentages dropped off markedly.

Activity: _62138_

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

* Conduct training and support the execution of training by assigned personnel and equipment in a state of readiness which will permit rapid employment in the event of partial or full mobilization.

* Manage assigned resources, and provide administrative and logistic support to assigned Reserve Units and Reservists.

* Provide Casualty Assistance Calls Officers for notification of next of kin in the Montana/Wyoming/North Dakota region.

* Act as emergency shelter in event of natural disaster if directed by higher authority.

* Provide administrative and facilities support for Reserve Recruiting.

* Provide administrative services and support to local active duty and retired personnel to include ID Cards, DEERS enrollment, and CHAMPUS information.

Projected Missions for FY 2001

* :s.

DUE TO UNIT SHIFTS, WE EXPECT TO TRAIN FEWER SELECTED RESERVES.

AMC
CNSRF 331
3 Feb 94

Activity: 62138

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

* N/A

*

Projected Unique Missions for FY 2001

* N/A

*

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 NAVRESREDCOMREG 22, Seattle, WA	UIC 68328
* Funding Source NAVRESREDCOMREG 22, Seattle, WA	UIC 68328

Activity: 62128

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.)

On Board Count as of 01 January 1994

	Officers	Enlisted	Civilian (Appropriated)	
*Reporting Command	01	~~06~~ 05	0	tmc CNSRF 331 3 Feb 94
Selected Reservists	18	125	0	
*Tenants (total)	01	09	0	
Selected Reservists	03	96	0	

Authorized Positions as of 30 September 1994

	Officers	Enlisted	Civilian (Appropriated)	
*Reporting Command	01	~~06~~ 05	0	tmc CNSRF 331 3 Feb 94
Selected Reservists	10	65	0	
*Tenants (total)	01	09	0	
Selected Reservists	05	79	0	

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.

Title/Name	Office (406)	Fax (406)	Home (406)
* LCDR Robert D. Buxton	248-2090	248-2042	248-2329

* Duty Officer (After Hours Pager) (406)255-1154

Activity: 62138

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)

Tenant Command Name	UIC	Officer	Enlisted	Civilian
INSPECTOR-INSTRUCTOR B CO 4TH RECON BN	87248	1	9	0

* Tenants residing on main complex (homeported units.)

Tenant Command Name	UIC	Officer	Enlisted	Civilian
N/A	N/A	N/A	N/A	N/A

* 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).

Tenant Command Name	UIC	Location	Officer	Enlisted	Civilian
N/A	N/A	N/A	N/A	N/A	N/A

* Tenants (Other than those identified previously)

Tenant Command Name	UIC	Location	Officer	Enlisted	Civilian
N/A	N/A	N/A	N/A	N/A	N/A

Activity: 62138

Data Calls 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 (include mechanism such as ISSA, MOU, etc.)
N\A		
N\A		
N\A		

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. (Provide 12 copies.)

* 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). (Provide in two sizes: 36"x 42" (2 copies, if available); and 11"x 17" (12 copies).)

* 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. (Provide 12 copies of each, 8½"x 11".)

* Air Installations Compatible Use Zones (AICUZ) Map. (Provide 12 copies.)

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

ROBERT D. BUXTON
NAME (Please type or print)

Signature

COMMANDING OFFICER
Title

25 JAN 94
Date

NAVMARCORESCEN BILLINGS MT
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)

K. W. MILLER CAPT/USNR
NAME (Please type or print)

Signature

DEPUTY COMMANDER ACTING CDR
Title

31 JAN 94
Date

NAVRESREDCOMREG 22
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
Title

2 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
Title
4400 Dauphine St.
New Orleans, LA 70146

2/10/94
Date

Activity

NMCRC BILLINGS

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)

Signature

Acting
Title

15 Feb 1994
Date

NMURC BILLINGS, MT

724

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

ORIGINAL

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.

I+I B CO FORTH RECON ~~SAT~~ 07248

BRAC 1995 ENVIRONMENTAL DATA CALL:
All Navy/Marine Corps Host Ativities

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WRAP-UP	20

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)
example: Haliaeetus leucocephalus - bald eagle	*threatened*	*Federal*	*25*	*0*
NONE				

Source Citation:_____

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/NO
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/NO

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

NONE REQUIRED

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

NONE REQUIRED

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/NO
Has a wetlands survey in accordance with established standards been conducted for your base?	YES/NO
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:_____

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. N/A

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/NO

NOT REQUIRED - BUILDING BUILT IN 1947 BUTLER PREFABRICATED STRUCTURE

3b.

	YES/NO
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.	YES/NO

3c.

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

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			

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

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

YES. BUILDING CONTAINS SMALL AMOUNTS OF ASBESTOS WHICH IS SCHEDULED TO BE REMOVED UNDER CONTRACT BEING AWARDED BY COMNAVRESFOR AND EFA SILVERDALE, WA. ADDITIONALLY, ASBESTOS SIDING ON EXTERIOR OF BUILDING WILL BE REMOVED.

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

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

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.

WASTEWATER IS NOT MEASURED OR REQUIRED TO BE MEASURED. NO LIMITS SET BY SANITARY SEWER AUTHORITY. NO DISCHARGE VIOLATIONS.

4f.

Does your base operate an Industrial Waste Treatment Plant (IWTP)?					YES / NO
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. N/A

4g. Are there other waste treatment flows not accounted for in the previous tables? Estimate capacity and describe the system. N/A

4h.

Does your base operate drinking Water Treatment Plants (WTP)?					YES / NO
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.
N/A

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.

BUILDING WATER SUPPLY IS CITY SUPPLIED AND THE RESERVE CENTER IS BILLED MONTHLY.

4j.

Does the presence of contaminants or lack of supply of water constrain base operations. Explain.	YES/NO

4k.

Other than those described above does your base hold any NPDES or stormwater permits? If YES, describe permit conditions.	YES/NO
If NO, why not and provide explanation of plan to achieve permitted status.	NO

NOT REQUIRED BY LOCAL AUTHORITY

4l.

	YES/NO
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/NO NO

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 FY1997 result in additional capacity? Explain. NO/ 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. NO/ N/A

5. AIR POLLUTION

5a.

What is the name of the Air Quality Control Areas (AQCAs) in which the base is located? YELLOWSTONE COUNTY AIR POLLUTION CONTROL
Is the installation or any of its OLFs or non-contiguous base properties located in different AQCAs? N/A . List site, location and name of AQCA.

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.

Site: NAVMARCORESCEN BILLINGS MT AQCA: YELLOWSTONE COUNTY

Pollutant	Attainment	Non-Attainment	Maintenance	Target Attainment Year[1]	Comments[2]
CO		X			
Ozone	X				
PM-10	X				
SO_2		X			
NO_2	X				
Pb	X				

[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.

PER MR. JIM HUGHS/DEPARTMENT OF HEALTH AND ENVIRONMENTAL SCIENCES (FEDERAL AIR QUALITY BUREAU)

(406)657-2617

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. N/A

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

Source Document: _____

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. N/A

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

Source Document: _____

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? N/A

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. N/A

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? N/A

BILLINGS, MT

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	31JUL92	85,000					
Safe Drinking Water Act	N/A						
PCBs	N/A						
Other (non-PCB) Toxic Substance Control Act	N/A						
Lead Based Paint	12FEB93	80,000					
Radon	N/A						
Clean Water Act	N/A						
Solid Waste	N/A						
Oil Pollution Act	N/A						
USTs	06JUL92						
Other	N/A						
Total		165,000	*				

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

* EXTERIOR OF BUILDING IS BEING RESIDED. ABATING LEAD BASE PAINT AND EXTERIOR OF ASBESTOS BOARD. EST COMPLETION DATE: 01 OCT 94

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) 34,574. Are asbestos survey costs based on encapsulation, removal or a combination of both?

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								
PA								
Other O&MN (specify)		38,000	165,000					
Other (specify)								
TOTAL:		38,000	165,000					

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. N/A

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

[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/NO
Is there a groundwater treatment system planned?	YES/NO

State scope and expected length of pump and treat operation. N/A

7e.

Has a RCRA Facilities Assessment been performed for your base?	YES/NO

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.	NO/ N/A

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
NMCRC BILLINGS	1.07	BILLINGS, MT

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.)		1.07
Total Undeveloped (areas that are left in their natural state but are under specific environmental development constraints, i.e.: wetlands, endangered species, etc.)		Wetlands: NONE
		All Others: NONE
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		NONE
Total Undeveloped land considered to be without development constraints		NONE
Total Off-base lands held for easements/lease for specific purposes		NONE
Breakout of undeveloped, restricted areas. Some restricted areas may overlap:	ESQD	N/A
	HERF	N/A
	HERP	N/A
	HERO	N/A
	AICUZ	N/A
	Airfield Safety Criteria	N/A
	Other	N/A

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? _____/_____/_____ Are any waivers of airfield safety criteria in effect on your base? Y/N Summarize the conditions of the waivers below. N/A

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. N/A

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

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. N/A

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

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

NOT APPLICABLE

8h.

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

8.i. List any requirements or constraints resulting from consistency with **State Coastal Zone Management Plans.** NOT APPLICABLE

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

NOT APPLICABLE

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

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.

NOT APPLICABLE

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

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

ROBERT D. BUXTON
NAME (Please type or print)

Signature

COMMANDING OFFICER
Title

12 MAY 94
Date

REDCOM 22
Division

NAVAL RESERVE
Department

NMCRC BILLINGS MT
Activity

Enclosure (1)

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

ROBERT D. BUXTON
NAME (Please type of print)

Robert D. Buxton
Signature

COMMANDING OFFICER
Title

12 MAY 94
Date

NMCRC BILLINGS MT
Activity

Billings_MT

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

NEXT ECHELON LEVEL (if applicable)

RADM G. DENNIS VAUGHAN
NAME (Please type or print

Signature

COMMANDER
Title

21 May 1994
Date

NAVAL RESERVE READINESS
COMMAND REGION TWENTY-TWO
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 of print

Signature

Commander - Acting
Title

7 JUN 1994
Date

COMNAVSURFRESFOR
Activity

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

TF Hall
Signature

Commander, Naval Reserve Force
Title

6/8/94
Date

4400 Dauphine St.
New Orleans, LA 70146
Activity

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

Signature

ACTING
Title

6/24/94
Date

724

CAPACITY ANALYSIS:
DATA CALL WORK SHEET FOR
RESERVE CENTER: NAVMARCORESCEN BILLINGS MT
ACTIVITY UIC: 62138

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

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

ORIGINAL

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1INTRODUCTION

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.

UIC: 62138

MISSION REQUIREMENTS:

A. AUTHORIZED/D RECTED 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 (crill 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 faci ities 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	2900	2900	2900	2900			
Assembly Hall	72	72	72	72			
Conference/Classroom	288	288	288	288			
Multi-Media Center	N/A DO NOT HAVE ONBOARD						
Team Training	N/A DO NOT HAVE ONBOARD						
Armory	96	96	96				
Other (designate)							

Duplicate all charts as necessary.

UIC: 62138

2. Throughput. For each type of drill space utilization n 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)				
~~Classrooms~~	1992	1993	1994	1995	1997	1999	2001
Assembly Hall (Drill Hall)	240	220	210				
Conference/Classroom	160	140	130				
Multi-Media Center	N/A	DO NOT HAVE ONBOARD					
Team Training	N/A	DO NOT HAVE ONBOARD					
Shops							
Armory	80	80	80				
Other (designate)							
Classrooms	240	220	210				

UIC: 62138

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
NUMBER OF SELRES	ACTUAL MANNING LEVEL	~~160~~ 142	~~140~~ 153	~~130~~ 138	141	141	141	141
	AUTHORIZED BILLETS	~~100~~ 90	~~96~~ 94	~~96~~ 97	~~80~~ 97	97	97	97
NUMBER OF TARs	ACTUAL MANNING LEVEL *	5 ~~6~~	5 ~~6~~	5 ~~6~~	5 ~~6~~	5	5	5
	AUTHORIZED BILLETS	6	6	6	6	6	6	6
USN	ACTUAL MANNING LEVEL	1	0	0	0	→	→	→
	AUTHORIZED BILLETS	1	0	0	0	→	→	→

* 1 officer/~~4~~ 1 enlisted

AMC
CNSRF
331
24 Jun 94

28 JUN 94
JDV
CNSRF - 311C1

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

CATEGORY		FY 1992	FY 1993	FY 1994	FY 1995	FY 1997	FY 1999	FY 2001
NUMBER OF USMCR	ACTUAL MANNING LEVEL	87	84	80	NA	NA	NA	NA
	AUTHORIZED BILLETS	80	80	80	80	80	80	80
NUMBER OF FTS	ACTUAL MANNING LEVEL	2	2	1	NA	NA	NA	NA
	AUTHORIZED BILLETS	2	2	1	1	1	1	1
USMC	ACTUAL MANNING LEVEL	8	8	8	8	8	8	8
	AUTHORIZED BILLETS	8	8	8	8	8	8	8

5. Major Equipment. Identify major equipment (tanks, trucks, training craft, aircraft, etc.), if any, used in Authorized/Directed Drill Utilization at your Reserve Command/Center that require special facilities for storage and maintenance (21x-xx and 4xx-xx Category Code Numbers [CCNs] as listed in the NAVFAC P-72 and described in the NAVFAC P-80, etc.) and give the types and sizes of those facilities needed. Do not include training facilities (171-xx and 179-xx CCNs). Add other types of equipment as needed. Provide facility(drill space) requirements in terms of square feet (SF) unless another measure is appropriate; indicate alternate unit of measure if used. **Duplicate this chart as needed to list all equipment..**

Type of Equipment	Number by Type	CCN:		CCN:		CCN:	
		Number of Facilities	Total SF Required	Number of Facilities	Total SF Required	Number of Facilities	Total SF Required
SCUBA EQUIPMENT W/SUPPORTING EQUIP.	24	1	1000	NA	NA	NA	NA
PARACHUTES W/ SUPPORTING EQUIP.	70	1	1450	NA	NA	NA	NA
BOAT ZODIC W/ SUPPORTING EQUIP	4	1	600	NA	NA	NA	NA
EMBARKATION BOXS	100	1	500	NA	NA	NA	NA
MARINE COMBAT EQUIPMENT	110	1	1800	NA	NA	NA	NA
WEIGHT ROOM	1	1	500	NA	NA	NA	NA
M813A1 Vehicle Trailer	2						
M998 5 Ton Vehicle	3						
M1008 CUCV	3						
M105A2 HMMWV	2						
GME Vehicle	2						

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
N/A NO SUCH AREAS AT THIS COMMAND		

06/14/1994 14:42 FROM TO 912065263339 P.11

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 & MARINE CORPS RESERVE CENTER, BILLINGS, MONTANA									
	FY 1993		FY 1995		FY 1997		FY 1999		FY 2001	
	BILLETS	MANNING	BILLETS	MANNING	BILLETS	MANNING	BILLETS	MANNING	BILLETS	MANNING
4 MARDIV 4 RECON DET B	6	4	4	4	4	4	4	4	4	4
MOBASCONTGRP 2201	0	1	0	0	0	0	0	0	0	0
NMCB 18 DET 0618	2	44	1	41	1	41	1	41	1	41
SIMA PEARL 222	23	36	22	41	22	41	22	41	22	41
MTF PUGET SOUND DET 922	13	15	14	14	14	14	14	14	14	14
VOLTRAUNIT 2201	0	6	0	3	0	3	0	3	0	3
AMCC 2 YOKO 222	17	12	0	0	0	0	0	0	0	0
FH 500 CBTZ 9 DET A	16	17	40	19	40	19	40	19	40	19
SUPDET YOKOSUKA DETA122	17	18	16	19	16	19	16	19	16	19
	94	153	97	141						

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
Co B, 4thReconBn	80	87	80	80	80	UNK	80	UNK	80	UNK
I-I Stf, Co B, 4thReconBn	10	10	9	9	9	UNK	9	UNK	9	UNK

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
N/A NO ARMY UNIT ASSIGNED										

Duplicate this chart as necessary to list all units.

06/14/1994 14:40 FAX 01 3120020020

UIC: 62138

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
N/A NO COAST GUARD UNIT ASSIGNED										

Duplicate this chart as necessary to list all units.

e.

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
N/A NO NATIONAL GUARD UNITS ASSIGNED										

Duplicate this chart as necessary to list all units.

06/14/1994 14:43 FROM 10 9126052600339 P.18

UIC: 62138

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
N/A NO AIR NATIONAL GUARD UNITS ASSIGNED										

Duplicate this chart as necessary to list all units.

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
N/A NO JOINT UNITS ASSIGNED										

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
N/A							

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

3 WEEKENDS (2 USNR/1 USMCR)

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:	5	N	0	8	480
Assembly Hall	1	N	0	3	288
Conference/Classroom	1	N	0	4	144
Multi-Media Center	N/A				
Team Training	N/A				
Shops	N/A				
Armory	1	N	0	8	480
Other (designate)					

06/14/1994 14:45 FROM 91208528339 P.21

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	4130	4130						
CLASSROOMS	2702	2702						
TRAINERS	N/A							
LABS	N/A							
SHOPS	1360	1360						
VEHICLE MAINTENANCE BAYS	N/A							
STORAGE	1565	1565						
SUPPLY	414	414						
Armory	196	196						
OTHER PASSAGEWAYS	1930	1930						
OTHER CCNs*								
TOTAL SQ. FT.	26,297 **	26,297						

* 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.

** INCLUDES USMC OFF-SITE VEHICLE STORAGE AREA/SHOPS

06/14/1994 14:46 FROM 10 P.22

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

06/14/1994 14:46 FROM 01 P.23

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 NO SUCH AREAS			

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

Airspace Name	Dimensions	Scheduling Agency	Controlling Agency
N/A NO SUCH AREAS			

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

Airfield	Location	Ownership (Service/non-DoD)
N/A NO AIRFIELDS USED BY THIS COMMAND		

1994-06-14 12:44 TOTAL P.25 PAGE = 25

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?** BY INCREASING NUMBER OF DRILL WEEKENDS AND BASED ON CURRENT CLASSROOM SPACE, COULD ACCOMODATE AN ADDITIONAL 200 SELRES IF THE ACDU STAFF WAS ADJUSTED ACCORDINGLY.

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.

None. WJB N959E for CNRF 7/20/94.

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).

EXPANSION AREA: COMMAND LOCATED IN RESIDENTIAL AREA AND ON EDGE OF CITY PARK SO EXPANSION OF BUILDING IN ANY DIRECTION IS NOT FEASIBLE.

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. BUXTON
NAME (Please type or print)

Signature

COMMANDING OFFICER
Title

20 JUN 94
Date

NAVMARCORESCEN BILLINGS MT
Activity

OPTIONAL FORM 99 (7-90)
FAX TRANSMITTAL
# of pages ▶
To P.Q. BEACH
From

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

NEXT ECHELON LEVEL (if applicable)

CAPT. S.M. BROOKER
NAME (Please type or print)

SMBrooker
Signature

Commander, Acting
Title

6/18/94
Date

NAVAL RESERVE READINESS
COMMAND REGION TWENTY-TWO
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

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
NAME (Please type or print)

TF Hall
Signature

Title

7/5/94
Date

Activity

4607 COPIES

Data Call 48 Activity: NMCRC BILLINGS, MT

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	W A Earner
Name	Signature
	7/20/94
Title	Date

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DATA CALL 65
ECONOMIC AND COMMUNITY INFRASTRUCTURE DATA

Activity Name:	NAVMARCORESCEN BILLINGS MONTANA
UIC:	62138
Major Clast Claimant:	COMNAVRESFOR

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

ORIGINAL

source. Records must be retained by the certifying official to clearly document the source of any non-DoD information submitted for this data call.

DATA CALL 65
ECONOMIC AND COMMUNITY INFRASTRUCTURE DATA

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.

Average Appropriated Fund Civilian Salary Rate:	N/A

NO CIVILIAN EMPLOYEES

Source of Data (1.a. Salary Rate):

DATA CALL 65
ECONOMIC AND COMMUNITY INFRASTRUCTURE DATA

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ECONOMIC AND COMMUNITY INFRASTRUCTURE DATA

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			
YELLOWSTONE		13	Ø	93%	5	15
STILLWATER		1	Ø	7%	28	25

= 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 GOVERNMENT HOUSING AVAILABLE

DATA CALL 65
ECONOMIC AND COMMUNITY INFRASTRUCTURE DATA

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)
SPOKANE, WA	SPOKANE	560
DENVER, CO	ARAPOHOE	553
SEATTLE, WA	KING	826
PORTLAND, OR	MULTNOMAH	901
BOISE, ID	ADA	606

Source of Data (1.c. Metro Areas): 1994 ROAD ATLAS

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ECONOMIC AND COMMUNITY INFRASTRUCTURE DATA

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

N/A NO CIVILIAN EMPLOYEES

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):

DATA CALL 65
ECONOMIC AND COMMUNITY INFRASTRUCTURE DATA

e. **Education Level of Civilian Workforce** N/A
NO CIVILIAN EMPLOYEES

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		
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.)	
Associate Degree	
Bachelor Degree	
Masters Degree	
Doctorate	

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

DATA CALL 65
ECONOMIC AND COMMUNITY INFRASTRUCTURE 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.** N/A
NO CIVILIAN EMPLOYEES

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		

DATA CALL 65
ECONOMIC AND COMMUNITY INFRASTRUCTURE DATA

Industry	SIC Codes	No. of Civilians	% of Civilians
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		
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		

N/A NO CIVILIAN EMPLOYEES

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ECONOMIC AND COMMUNITY INFRASTRUCTURE DATA

Industry	SIC Codes	No. of Civilians	% of Civilians
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		
6c. Public Finance	93		
6d. Environmental Quality and Housing Programs	95		
Sub-Total 6a. through 6d.			
TOTAL			100 %

N/A NO CIVILIAN EMPLOYEES

Source of Data (l.f.) Classification By Industry Data):

DATA CALL 65
ECONOMIC AND COMMUNITY INFRASTRUCTURE 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		
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)		

N/A NO CIVILIAN EMPLOYEES

DATA CALL 65
ECONOMIC AND COMMUNITY INFRASTRUCTURE DATA

Occupation	Number of Civilian Employees	Percent of Civilian Employees
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		
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		

N/A NO CIVILIAN EMPLOYEES

Occupation	Number of Civilian Employees	Percent of Civilian Employees
11. Handlers, Equipment Cleaners, Helpers and Laborers (not included elsewhere)		
TOTAL		100 %

N/A NO CIVILIAN PERSONNEL

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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ECONOMIC AND COMMUNITY INFRASTRUCTURE DATA

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:	72%
2. Percentage of Military Spouses Who Work Outside of the Home:	100%
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):	USMC - I & I STAFF USN - RESCEN CO

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ECONOMIC AND COMMUNITY INFRASTRUCTURE DATA

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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ECONOMIC AND COMMUNITY INFRASTRUCTURE DATA

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
Schools - Public			A
Schools - Private			A
Public Transportation - Roadways			A
Public Transportation - Buses/Subways			A
Public Transportation - Rail			A
Fire Protection			A
Police			A
Health Care Facilities			A
Utilities:			A
Water Supply			A
Water Distribution			A
Energy Supply			A
Energy Distribution			A
Wastewater Collection			A
Wastewater Treatment			A
Storm Water Collection			A
Solid Waste Collection and Disposal			A
Hazardous/Toxic Waste Disposal			A
Recreational Activities			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 NO "C" RATINGS

Source of Data (2.a. 1) & 2) - Local Community Table):

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ECONOMIC AND COMMUNITY INFRASTRUCTURE DATA

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
Schools - Public			A
Schools - Private			A
Public Transportation - Roadways			A
Public Transportation - Buses/Subways			A
Public Transportation - Rail			A
Fire Protection			A
Police			A
Health Care Facilities			A
Utilities:			A
Water Supply			A
Water Distribution			A
Energy Supply			A
Energy Distribution			A
Wastewater Collection			A
Wastewater Treatment			A
Storm Water Collection			A
Solid Waste Collection and Disposal			A
Hazardous/Toxic Waste Disposal			A
Recreation Facilities			A

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

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ECONOMIC AND COMMUNITY INFRASTRUCTURE DATA

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 NO "C" RATINGS

Source of Data (2.b. 1) & 2) - Regional Table):

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ECONOMIC AND COMMUNITY INFRASTRUCTURE DATA

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:	YELLOWSTONE COUNTY:	5%
	STILLWATER COUNTY:	3%
Units for Sale:	YELLOWSTONE COUNTY:	8%
	STILLWATER COUNTY:	5%

Source of Data (3.a. Off-Base Housing): BILLINGS REALTORS MULTIPLE LISTING

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ECONOMIC AND COMMUNITY INFRASTRUCTURE DATA

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 Unit? *
		Elementary	Middle	High	Current	Max Capacity	Current	Max Ratio	
DISTRICT #5	STILLWATER			1*	320	400	28-1	30-1	N/A
				* FOR ALL		GRADES			
DISTRICT #2	YELLOWSTONE	27	4	4	16,291	20,000	20-1	30-1	N/A

* Answer "Yes" in this column if the school district in question enrolls students who reside in government housing.
NO GOVERNMENT HOUSING AVAILABLE

Source of Data (3.b.1) Education Table): SCHOOL DISTRICT OFFICES

2) Are there any on-base "Section 6" Schools? If so, identify number of schools and current enrollment.

N/A NO ON-BASE SCHOOLS

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

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ECONOMIC AND COMMUNITY INFRASTRUCTURE DATA

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 :

MONTANA STATE UNIVERSITY, BILLINGS (FORMERLY EASTERN MONTANA COLLEGE)
ROCKY MOUNTAIN COLLEGE
YELLOWSTONE BAPTIST COLLEGE

Source of Data (3.b.3) Colleges): STATE EDUCATION OFFICES

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:

BILLINGS VOCATIONAL TECHNICAL CENTER: ACCOUNTING, DATA ENTRY, LEGAL SECRETARY, MEDICAL SECRETARY, DRAFTING, CULINARY ARTS, PRACTICAL NURSING, DIESEL TECHNOLOGY, METAL FABRICATION, AUTO TECHNOLOGY

MAY TECHNICAL CENTER: ELECTRONICS TECHNICIAN, RADIO-BROADCASTING

Source of Data (3.b.4) Vo-tech Training): BILLINGS VO-TECH CENTER

c. **Transportation.**

1) Is the activity served by public transportation?

	Yes	No
Bus:	X	
Rail:		X
Subway:		X
Ferry:		X

Source of Data (3.c.1) Transportation): CHAMBER OF COMMERCE

2) Identify the location of the nearest passenger railroad station (long distance rail service, not commuter service within a city) and the distance from the activity to the station.

MALTA, MT (200 MILES NORTH OF BILLINGS) AMTRAK STATION

Source of Data (3.c.2) Transportation): CHAMBER OF COMMERCE

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.

BILLINGS LOGAN INTERNATIONAL AIRPORT

Source of Data (3.c.3) Transportation):

4) How many carriers are available at this airport?

FIVE: BIG SKY, DELTA, HORIZON, NORTHWEST, UNITED

Source of Data (3.c.4) Transportation): BILLINGS LOGAN AIRPORT

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

INTERSTATE 94: 3 MILES
INTERSTATE 90: 2 MILES

Source of Data (3.c.5) Transportation): STATE HIGHWAY COMMISSION

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 problems, etc.)

RESCEN IN RESIDENTIAL AREA, NO CONGESTION PROBLEMS

b) Do access roads transit residential neighborhoods?

YES/RESCEN IN RESIDENTIAL AREA

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):

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/BILLINGS FIRE DEPARTMENT/LITTLE OR NO HAZMAT ONBOARD

Source of Data (3.d. Fire/Hazmat): BILLINGS FIRE DEPARTMENT

e. **Police Protection.**

1) What is the level of legislative jurisdiction held by the installation? CITY OF BILLINGS POLICE DEPARTMENT

PROPRIETARY

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. EXCLUSIVE

USMC AND USN BOTH HAVE INTRUSION ALARM SYSTEMS WHICH ARE SEPARATE FROM EACH OTHER (USMC DOES HAVE ARMORY). BILLINGS POLICE RESPOND TO ALARMS.

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): BILLINGS POLICE DEPARTMENT

CNRF 003

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.

YES/WATER & REFUSE: CITY OF BILLINGS
ELECTRICITY: MONTANA POWER
NATURAL GAS: MONTANA-DAKOTA UTILITIES

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/ONLY MINOR ELECTRICAL OUTAGES CAUSED BY WIND OR SNOW AND ARE USUALLY OF SHORT DURATION

Source of Data (3.f. 1) - 3) Utilities): INDIVIDUAL UTILITY COMPANIES

DATA CALL 65
ECONOMIC AND COMMUNITY INFRASTRUCTURE DATA

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. SCHOOL DISTRICT #2	EDUCATION	2,000
2. ST VINCENTS HOSPITAL	HOSPITAL/MEDICAL	1,580
3. DEACONESS HOSPITAL	HOSPITAL/MEDICAL	1,453
4. CITY OF BILLINGS	CITY SERVICES	650
5. BUTTREY FOODS	FOOD & DRUGS	517
6. BILLINGS CLINIC	MEDICAL	500
7. YELLOWSTONE COUNTY	COUNTY SERVICES	475
8. MONTANA STATE UNIV, BILLINGS	4 YEAR COLLEGE	450
9. INTERSTATE BANK CORP	FINANCIAL	400
10. NORWEST BANK CORP	FINANCIAL	375

Source of Data (4. Business Profile): CHAMBER OF COMMERCE

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ECONOMIC AND COMMUNITY INFRASTRUCTURE DATA

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:

NONE

b. Introduction of New Businesses/Technologies:

SEVERAL NEW BUSINESSES HAVE OPENED IN AREA: SEVERAL RESTAURANT CHAINS, WAL-MART, HOME DEPOT, GART BROTHERS, ETC.

c. Natural Disasters:

NONE

d. Overall Economic Trends:

BUSINESS ON UPSWING. HOME SALES REMAIN VERY HIGH. EXPECTED TO LAST FOR NEXT FIVE YEARS BASED ON REPORTS FROM YELLOWSTONE COUNTY CHAMBER OF COMMERCE.

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

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

N/A

Source of Data (6. Other):

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. BUXTON	R. Buxton
NAME (Please type or print)	Signature
COMMANDING OFFICER	13 JUL 94
Title	Date
NAVMARCORESCEN BILLINGS MT	
Activity	

1994-07-12 09:22 1 206 526 3339 008 P01

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

NEXT ECHELON LEVEL (if applicable)

G. DENNIS VAUGHAN, RADM, USNR
NAME (Please type or print)

Signature

COMMANDER
Title

JULY 12 1994
Date

NAVAL RESERVE READINESS
COMMAND REGION TWENTY-TWO
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

14 JULY 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

DIRNAVRES
Title

7/25/94
Date

COMNAVRESFOR
Activity

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

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DATA CALL 66
INSTALLALATION RESOURSES

724

Activity Information:

Activity Name:	B CO, 4TH RECON BN BILLINGS MT
UIC:	45379
Host Activity Name (if response is for a tenant activity):	NMCRC BILLINGS M NMCRC Billings, MT (NAVY HOST)
Host Activity UIC:	N62138

General Instructions/Background. A separte response to this data call must be completed for each Department of the Navy (DON) host, independent and tenant activity which separtely 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 bugdet data supporting the FY 1996 NAVCOMPT Budget Submit. Two tables are provided. Table 1A identifies "Other than DBOF Overhead" BOS costs and Table1B identifies "DBOF Overhead" BOS costs. These tables must be completed, as appropriate, for all DON host, independent or tenant activities which separtely 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). 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 budget 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 activity 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 lines to the table (following line 2j., as necessary, to identify any additional cost elements not currently shown). Leave shaded areas of table blank.

DATA CALL 66
INSTALLATION RESOURCES

TABLE 1A - Base Operating Support Costs (Other Than DBOF Overhead)			
Activity Name: B CO, 4TH RECON BN BILLINGS MT		**UIC:** 45379	
Category	**FY 1996 BOS Costs ($000)**		
	Non-Labor	**Labor**	**Total**
1. Real Property Maintenance Costs:			
1a. Maintenance and Repair	$0.00	0.00	$0.00
1b. Minor Construction	0.00	0.00	0.00
1c. Sub-total 1a. and 1b.	**$0.00**	0.00	**$0.00**
2. Other Base Operating Support Costs:			
2a. Utilities	$9,638.00	0.00	$9,638.0
2b. Transportation	$488.00	0.00	$488.0
2c. Environmental	$0.00	0.00	$0.0
2d. Facility Leases	$16,396.80	0.00	$16,396.8
2e. Morale, Welfare & Recreation	$0.00	0.00	$0.0
2f. Bachelor Quarters	$7,198.00	0.00	$7,198.0
2g. Child Care Centers	$0.00	0.00	$0.00
2h. Family Service Centers	$0.00	0.00	$0.00
2i. Administration	$14,396.00	0.00	$14,396.0
2j. Other (Specify)	$4,514.00	0.00	$4,514.0
2k. Sub-total 2a. through 2j :	**$52,630.80**	0.00	**$52,630.8**
3. Grand Total (sum of 1c. and 2k.) :	**$52,630.80**	0.00	**$52,630.80**

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:

Appropriation	Amount ($000)
N/A	

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.

Enclosure (5)

DATA CALL 66
INSTALLATION RESOURCES

Table 1B - Base Operating Support Costs (DBOF Overhead)			
Activity Name: B CO, 4TH RECON BN BILLINGS MT		**UIC:** 45379	
Category	**FY 1996 Net Cost From UC/FUND-4 ($000)**		
	Non-Labor	**Labor**	**Total**
1. Real Property Maintenance Costs:			
1a. Real Property Maintenance (>$15K)			N/A
1b. Real Property Maintenance (<$15K)			N/A
1c. Minor Construction (Expensed)			N/A
1d. Minor Construction (Capital Budget)			N/A
1e. Sub-total 1a. through 1d.			N/A
2. Other Base Operating Support Costs:			
2a. Command Office			N/A
2b. ADP Support			N/A
2c. Equipment Maintenance			N/A
2d. Civilian Personnel Services			N/A
2e. Accounting/Finance			N/A
2f. Utilities			N/A
2g. Environmental Compliance			N/A
2h. Police and Fire			N/A
2i. Safety			N/A
2j. Supply and Storage Operations			N/A
2k. Major range Test Facility Base Costs			N/A
2l. Other (Specify)			N/A
2m. Sub-total 2a. through 2l:			N/A
3. Depreciation			N/A
4. Grand Total (sum of 1c., 2m., and 3.):			N/A

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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-heading 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. Reger 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 identifed. 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: B CO, 4TH RECON BN BILLINGS MT	**UIC:** 45379
Cost Category	**FY 1996 Projected Costs ($000)**
Travel:	$15,408.78
Material and Supplies (including equipment):	$21,593.61
Industrial Fund Purchases (other DBOF purchases):	$0.00
Transportation:	$0.00
Other Purchases (Contract support, etc.):	$15,628.41
Total:	$52,630.80

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 estimat 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. **See note.

Table 3 - Contract Workyears	
Activity Name: B CO, 4TH RECON BN BILLINGS MT	**UIC:** 45379
Contract Type	**FY 1996 Estimated Number of Workyears On-Base**
Construction:	N/A
Facilities Support:	N/A
Mission Support:	N/A
Procurement:	N/A
Other: *	N/A
Total Workyears: **	N/A

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

** Contract workyears are insignificant and not recoverable.

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**):

**See Note

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

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

Note: **Contract workyears are insignificant and not recoverable.

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.?** See Note.

N/A

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)):

N/A

2) Estimated number of workyears which would be eliminated:

N/A

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):

N/A

Note: **Contract workyears are insignificant and not recoverable.

BRAC-95 CERTIFICATION
DATA CALL: 66
INSTALLATION RESOURCES

I certify that the information contained herein is accurate and complete to the best of my knowledge and belief. The attached 191 formats represent the MARRESFOR site submissions for BRAC 66.

LtCol Steven J. Gaffney
NAME

SIGNATURE

Assistant Chief of Staff, Comptroller
TITLE

20 Sept '94
DATE

Comptroller
DEPARTMENT

MARRESFOR
ACTIVITY

Enclosure (2)

BRAC-95 CERTIFICATION
DATA CALL: 66
INSTALLATION RESOURCES

I certify that the information contained herein is accurate and complete to the best of my knowledge and belief. The attached 191 formats represent the MARRESFOR site submissions for BRAC 66.

J. E. LIVINGSTON
NAME

SIGNATURE

COMMANDING GENERAL
TITLE

26 Sept 94
DATE

COMMAND
DEPARTMENT

MARRESFOR
ACTIVITY

Enclosure (1)

Data Call 66
MARRESFOR

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 of print

Signature

Title

Date

Activity

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

MAJOR CLAIMANT LEVEL

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 belief.

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

J.A. BRABHAM
LIEUTENANT G[illegible] MARINE CORPS
DEPUTY CHIE[illegible]
INSTALLATIONS AND [illegible]S

Signature

10/26/94

Date

Document Separator

DATA CALL 63
FAMILY HOUSING DATA

726

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

Installation Name:	NMCRC Bossier City
Unit Identification Code (UIC):	N61944
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)

Signature

COMMANDER
Title

7/20/94
Date

NAVAL FACILITIES ENGINEERING COMMAND
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

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)

Signature

CAPT. CEC, USN
COMMANDING OFFICER
Title

27 June 1994
Date

SOUTHNAVFACENGCOM
Activity

Enclosure (1)

BRAC-95 CERTIFICATION

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

YVONNE O. SPRING
NAME (Please type or print)

Signature

Housing Management Specialist
Title

27 June 1994
Date

Housing Division
Division

Facilities Management Dept.
Department

SOUTHNAVFACENGCON
Activity

Enclosure (1)

726

DATA CALL 1: GENERAL INSTALLATION INFORMATION

1. **ACTIVITY:**

* Name

Official Name	Naval & Marine Corps Reserve Center, Bossier City, LA
Acronym(s) used in correspondence	NAVMARCORESCEN, Bossier City N&MCRC Bossier City, LA
Commonly accepted short titles	N/A

* Complete mailing address:

Naval & Marine Corps Reserve Center
1440 Swan Lake Road
Bossier City, LA 71111-5334

* PLAD: NAVMARCORESCEN BOSSIER CITY LA

* PRIMARY UIC: 61944

* ALL OTHER UIC(s): None

2. PLANT ACCOUNT HOLDER:
* Yes _X_ No ___

3. **ACTIVITY TYPE:**

* **HOST COMMAND:**

Yes _X_ No ___

* **TENANT COMMAND:**

Yes ___ No _X_

* **INDEPENDENT ACTIVITY:**

Yes ___ No _X_

4. **SPECIAL AREAS:**

N/A. This command does not have responsibility for land, buildings, structures, or utilities at remote sites.

Data Call 1: General Installation Information, continued

5. **DETACHMENTS:**

N/A. No detachments at other locations.

6. **BRAC IMPACT:**

Yes, drilling population increased by approximately 50 personnel, due to BRAC-93 closures of Naval Reserve Center, Monroe, LA and Naval Reserve Facility, Alexandria, LA.

7. **MISSION:**

Current Missions

* Provide mobilization readiness training for Reserve SIMA Unit, in support of west coast ship repair facility.

* Provide mobilization readiness training for Reserve Hospital Unit.

* Provide administrative support and general military training for Naval Reserve Medical Unit supporting Marines.

* Provide mobilization readiness training for two reserve units augmenting ship's forces.

* Provide contributory medical support to Air Force reserve units in local area.

* Provide contributory medical support to local VA hospital.

* Provide Navy CACO services for Northwest Louisiana.

* Provide funeral honors support for Northwest Louisiana.

* Provide DEERS and identification card support for retirees, dependents, and active duty members on leave in Northwest Louisiana.

* Provide assistance and testing site for USN and USNR recruiters in Northwest Louisiana.

Projected Missions for FY 2001

* Provide mobilization readiness training for Reserve SIMA Unit, in support of west coast ship repair facility.

* Provide mobilization readiness training for Reserve Hospital Unit.

* Provide administrative support and general military training for Naval Reserve Medical Unit supporting Marines.

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

Data Call 1: General Installation Information, continued

* Provide contributory medical support to Air Force reserve units in local area.

* Provide contributory medical support to local VA hospital.

* Provide Navy CACO services for Northwest Louisiana.

* Provide funeral honors support for Northwest Louisiana.

* Provide DEERS and identification card support for retirees, dependents, and active duty members on leave in Northwest Louisiana.

* Provide assistance and testing site for USN and USNR recruiters in Northwest Louisiana.

8. **UNIQUE MISSIONS:**

Current Unique Missions

* All missions are common to Naval and Marine Corps Reserve Center activities.

Projected Unique Missions for FY 2001

* None known.

9. **IMMEDIATE SUPERIOR IN COMMAND (ISIC):**

* Operational name — UIC
Commander, Naval Reserve Readiness Command, Region Ten — 68307

* Funding Source
Same as ISIC

10. **PERSONNEL NUMBERS:**

On Board Count as of 01 January 1994

	Officers	Enlisted	Civilian (Appropriated)
ACTIVE DUTY *Reporting Command	1	~~10~~ 9	0
ACTIVE DUTY *Tenants (total)	1	10	0
SELRES Reporting Command	20	231	0
SELRES Tenants (total)	2	135	0

Activity: 61944

Data Call 1: General Installation Information, continued

Authorized Positions as of 30 September 1994

	Officers	Enlisted	Civilian (Appropriated)
ACTIVE DUTY *Reporting Command	1	~~88~~	0
ACTIVE DUTY *Tenants (total)	1	~~108~~	0
SELRES Reporting Command	13	86	0
SELRES Tenants (total)	5	168	0

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.

Title/Name	Office	Fax	Home
* CO			
LCDR F. Hall	318-746-9590	318-746-9580	903-753-2736
* Duty Officer			
* As assigned	318-746-9657/ 9658	318-746-9580	318-677-0471** ** after hours beeper

12. **TENANT ACTIVITY LIST:**

* Tenants residing on main complex (shore commands)

Tenant Command Name	UIC	Officer	Enlisted	Civilian
I&I STAFF, WPNS CO, 1ST BN, 23d MAR (Active Duty)	84283	1	8	0
~~(SELRES)~~	~~14133~~	~~2~~	~~135~~	~~0~~
Naval Reserve Recruiting	~~47765~~			
~~(active duty)~~		~~0~~	~~2~~	~~0~~

* Tenants residing on main complex (homeported units.)

N/A. No homeported units.

* Tenants residing in Special Areas

N/A. No special areas owned.

* Tenants (Other than those identified previously)

None.

Data Call 1: General Installation Information, continued

13. **REGIONAL SUPPORT:**

Activity name	Location	Support function (include mechanism such as ISSA, MOU, etc.)
Veteran's Administration	Overton-Brooks VA Hospital, Shreveport, LA	Medical training proficiency/ contributory support - LOA
USAF	Barksdale AFB, Bossier City, LA	Receive base support services. Use shop facilities for production trng/ contributory support. Provide medical contributory support-ISSA/LOA.

14. **FACILITY MAPS:**

* Local Area Map.

12 copies provided.

* Installation Map / Activity Map / Base Map / General Development Map / Site Map.

12 copies of 11" X 17" size provided. Copies of 36" X 42" size not available.

* Aerial photo(s).

12 copies provided.

* Air Installations Compatible Use Zones (AICUZ) Map.

N/A. Not an air installation.

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

LCDR F. HALL
NAME (Please type or print)

F Hallcom
Signature

Commanding Officer
Title

27 Jan 94
Date

N&MCRC, Bossier City, LA
Activity

RC 10 BOSSIER
(Shreveport)

Activity: N61944

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

Acting ~~Deputy~~ Commander
Title

1 FEB 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)

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. [illegible]
NAME (Please type or print)

T. F. Hall
Signature

[illegible] Reserve Force
Title

2/10/94
Date

[illegible] LA [illegible]
Activity

NMCRC Boston

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)

Signature

Acting
Title

15 Feb 1994
Date

NMCRC BOSSIER CITY

126

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.

I+I WPNS CO 1ST BN 23 MAR 84283

NMCRC BOSSIER CITY

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)**
example: Haliaeetus leucocephalus - bald eagle	*threatened*	*Federal*	*25*	*0*
None known	N/A	N/A	N/A	N/A

Source Citation: Metropolitan Planning Commission of Bossier City (MPC-BC); A. Dean Holt, Executive Director

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~~/NO
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~~/NO

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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.

N/A

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

Not applicable

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

Not applicable, per MPC-BC Executive Director

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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~~/NO
Has a wetlands survey in accordance with established standards been conducted for your base?	~~YES~~/NO
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: MPC-BC, Executive Director

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.

N/A

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~~/NO

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3b. YES/NO

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.	~~YES~~/NO

3c.

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

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			

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

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

N/A

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

N/A

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**

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**

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.

City of Bossier Utilities Department
Handled as regular business customer;
No known discharge limits.
No discharge violations.

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4f.

Does your base operate an Industrial Waste Treatment Plant (IWTP)?					~~YES~~ / NO
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~~ / NO
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.

Not applicable

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.

City of Bossier Utilities Department
Handled as regular business customer;
No known limits on capacity.

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4j.

Does the presence of contaminants or lack of supply of water constrain base operations. Explain.	~~YES~~/NO

4k.

Other than those described above does your base hold any NPDES or stormwater permits? If YES, describe permit conditions.	~~YES~~/NO
If NO, why not and provide explanation of plan to achieve permitted status.	N/A

4l. ~~YES~~/NO

Does your base have bilge water discharge problem?	No
Do you have a bilge water treatment facility?	No

Explain: Not located on waterfront; no vessels present; no bilge water discharge.

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~~/NO

None known, per MPC-BC Executive Director

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 ~~19~~97 result in additional capacity? Explain.

Not applicable

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

Not applicable

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5. AIR POLLUTION

5a.

What is the name of the Air Quality Control Areas (AQCAs) in which the base is located? AQCR 022, Bossier Parish Shreveport - Texarkana - Tyler Interstate AQCR
Is the installation or any of its OLFs or non-contiguous base properties located in different AQCAs? No . List site, location and name of AQCA.

CNRC OIEC 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.

Site: N&MCRC Bossier City AQCA: AQCR 022, Bossier Parish

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 (BTNS)
SO_2	X				BTNS
NO_2	X				Cannot be classified BTNS
Pb	X				Not designated

CNRC OIEC 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.

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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					
NOx					
VOC					
PM10					

Source Document: Per NAVFACENGCOM, South Div (Mary Stebelski) - Not applicable

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					
NOx					
VOC					
PM10					

Source Document: Per NAVFACENGCOM, SOUTH Div (Mary Stebelski) - Not applicable

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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.

Not applicable

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

SABINE NF, KISATCHIE NF

~~Not applicable~~

CNRF
OILC
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

DEPARTMENT OF THE NAVY
1537
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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 6b. 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	N/A						
PCBs	N/A						
Other (non-PCB) Toxic Substance Control Act	N/A						
Lead Based Paint	N/A						
Radon	N/A						
Clean Water Act	N/A						
Solid Waste	N/A						
Oil Pollution Act	N/A						
USTs	N/A						
Other	N/A						
Total	N/A						

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? No What % of your base has been surveyed for asbestos? N/A Are additional surveys planned? N/A. What is the estimated cost to remediate asbestos ($K) N/A. Are asbestos survey costs based on encapsulation, removal or a combination of both?

Construction on present facilities completed January 1993; Land previously undeveloped.

OPTIONAL FORM 99 (7-90)

FAX TRANSMITTAL # of pages ▶ 2

To CDR Clark	From NTMCLC Bossier C
Dept./Agency Code # 331	Phone # 318 746 9657
Fax #	Fax #

NSN 7540-01-317-7368 5099-101 GENERAL SERVICES ADMINISTRAT

6c. Provide detailed cost of recurring operational (environmental) compliance costs, with funding source. Not applicable

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

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. Not applicable

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

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

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

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

Not known

7d.

Is there a groundwater treatment system in place?	~~YES~~/NO
Is there a groundwater treatment system planned?	~~YES~~/NO

State scope and expected length of pump and treat operation.

Not applicable

7e.

Has a RCRA Facilities Assessment been performed for your base?	~~YES~~/NO

Only annual self-assessment has been done, per OPNAVINST 5090.1A

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.	No

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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
NMCRC BOSSIER CITY	5.6	1440 SWAN LAKE RD BOSSIER CITY LA

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.)		5.6
Total Undeveloped (areas that are left in their natural state but are under specific environmental development constraints, i.e.: wetlands, endangered species, etc.)		Wetlands: 0
		All Others: 0
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		0
Total Undeveloped land considered to be without development constraints		0
Total Off-base lands held for easements/lease for specific purposes		0
Breakout of undeveloped, restricted areas. Some restricted areas may overlap:	ESQD	0
	HERF	0
	HERP	0
	HERO	0
	AICUZ	0
	Airfield Safety Criteria	0
	Other	0

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. 0

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.

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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. N/A

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

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.

N/A

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

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

Not applicable

8h.

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

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

Not applicable

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

Not applicable

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 No agreement

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.

Not applicable

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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?

None known

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

None known

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

None known

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 known

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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

F. HALL
NAME (Please type of print)

COMMANDING OFFICER
Title

1440 SWAN LAKE ROAD
BOSSIER CITY, LA 71111-5334
Activity

F Hall
Signature

20 May 94
Date

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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

Signature

Acting Commander
Title

24 May 1994
Date

NAVRESREDCOM REG TEN
Activity

(CONCERNING: NAVMARCORESCEN, Bossier City,LA)

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

Signature

COMMANDER - ACTING
Title

7 JUN 1994
Date

COMNAVSURFRESFOR
Activity

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

TF Hall
Signature

Commander, Naval Reserve Force
Title

6/8/94
Date

4400 Dauphine St.
New Orleans, LA 70146
Activity

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

Signature

ACTING
Title

6/24/94
Date

126

ORIGINAL

MILITARY VALUE ANALYSIS:
DATA CALL WORK SHEET FOR
RESERVE CENTER: NAVMARCORESCEN BOSSIER CITY LA
ACTIVITY UIC: 61944

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

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

ENCLOSURE(11)

[redacted]

MISSION REQUIREMENTS

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

To provide readiness training and administrative support for Naval and Marine Corps drilling reservists from Northern Louisiana, East Texas, Southern Arkansas, and West Mississippi.

Additionally, to provide identification card and advancement examination support to recruiters, active duty personnel on leave, and retired personnel in this geographic area.

As required, provide funeral honors support, increase public awareness of the Navy-Marine Corps mission, assist with active duty recruiting, and enhance Navy-community relations in the geographic area.

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 x 48 x 16 = 3840.

Purpose of Utilization	Student Throughput	# of Uses	Drill Space Utilized	Facility (space) Hours
General Military Training	180	12	Drill hall	36
(CBs) General Military Training	100	4	Drill hall	32
In-Rate Training	180	24	Class rooms	312
Planning Board for Training	20	12	Conference room	18
Marine MOS Training	155	4	Drill hall	40

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
Weapons training	16	Hands-on training

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
General Military Inst.	12	Audio Visual Presentation Instructor
GMT (CB)	4	Audio Visual Presentation Instructor
In-rate Training	24	Video Tape and Gaining CMD Instruction

Virtually all training could be conducted elsewhere; limiting factor is travel funds.

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
NR NH P COLA 1410	USNR	83366	23	0	N/A
NR NH P COLA P1047A	USNR	82887	5	0	N/A
NR SIMA SD 410	USNR	89600	61	0	N/A
NR O'BRIEN 7510	USNR	89380	53	0	N/A
NR DUBUQUE 810	USNR	83024	36	0	N/A
NR 4TH MD 1/23	USNR	88465	14	0	N/A
NMCB 0728	USNR	85348	100	0	N/A
WEPS CO 1/23 4MD	USMCR	14133	125	0	N/A
N&MCRC Bossier City	USNR	61944	0	11	N/A
I&I 1/23 4TH MARDIV WEPS CO	USMC	84283	0	9	N/A

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
NONE	

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	SITE		
(Navy or Marine Corps	Reserve Command/Center	Gaining Command	Other Site
NR NH PCOLA P1047A	22%	11%	67%
NR SIMA SD 410	92%	8%	0%
NR O'BRIEN 7510	100%	0%	0%
~~NR DUBUQUE 810~~	~~100%~~	~~0%~~	~~0%~~
NR NH PCOLA 1410	92%	8%	0%
NR 4th MARDIV 1/23	33%	0%	67%
WEPS CO 1/23 4MARDIV	33%	0%	67%

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.

No records are kept regarding TAD drillers; anecdotally less than a dozen reservists per year do TAD drills here.

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.

In FY94, NR SIMA SD 410 spent approximately 16% of its drill utilization prov ng contributory support to SIMA San Diego and NRMTF Orange.

NR NH Pensacola 1410 spent approximately 33% of its drill utilization provid contributory support to NAVHOSP Pensacola and Overton-Brooks VA Hospital dur FY 94.

NR NH Pensacola P1047A spent approximately 33% of its drill utilization prov contributory support to NAVHOSP Pensacola and to this command (physical examination support) during FY 94.

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	172	211	2[illegible]

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

Name of Center	miles
HQ 1/156 Armor BN(Nat Guard) Shreveport, LA Army Reserve Center - Bossier City	13 4
HQ 528 ENGR BN (Nat Guard) Monroe, LA National Guard - 165th Trans BN HQ	100 1/2
Air Force Reserve - 917th Squadron 4158 U.S. Army Reserve School	9 8
Army Reserve Center - Texarkana Army Reserve Center - ElDorado, AR	78 92
HQ 527 ENGR BN (Nat Guard) Ruston, LA	65

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

Name of Center	miles
Naval Reserve Center, Tyler, TX	110
Army Reserve Center, Monroe, LA	101
Army Reserve Center - Alexandria, LA	105
412th Engineering Command (Army Reserve) Vicksburg, MS	190

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

Name of Center	Miles	Resources Shared
N&MCRC Baton Rouge	260	NONE
N&MCRC New Orleans	350	IVD Library

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.

No other major facilities other than those listed above.

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	18*

* Reserve recruiting waiting list average

VTU are all high-year tenure and ineligible for billets. Naval Reserve Personnel Center tracks personnel in IRR; statistics not locally available.

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.)

No maritime access.
Job base in area does not seem to attract people nationally; NAVET reservists tend to be returning to hometown, rather than relocating to area due to job opportunities. Therefore, limited pool of recruits.

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.)

Fairly limited pool of veteran recruits (virtually no officers). Travel time a disincentive to drill at other Naval Reserve 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).

NONE

I. Are any new military missions planned for this Reserve Command/Center?

NONE KNOWN

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 formal role assigned; Barksdale AFB as largest military presence is local coordinator.

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.)

Provide campaign Drug-Free presentations within approximately 100 mile radius
Funeral honors support
CACO Assistance
Color Guards within approximately 100 mile radius
Toys for Tots
Recruiting assistance, ID card issue, semi-annual blood drives, fund-raising and construction assistance for non-profit disabled recreational group.

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

NONE KNOWN.

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 SQ FT	Substan-dard	Inad-equate	Total	Plant Value	Leased Property (SF)	Cost of Leas Property
Admin	1 YR	6177					N/A	
Classrooms	1 YR	3264					N/A	
Trainers	N/A							
Labs	N/A							
Shops	N/A							
Bays	1 YR	924					N/A	
Storage	1 YR	2405					N/A	
Supply	1 YR	121					N/A	
Pistol Range (# of Facilities)	N/A							
Other Ranges (Specify) (# of Facilities)	N/A							
Armory	1 YR	480					N/A	
Parking - POV (Sq. Yds. (SY))	1 YR	4000					N/A	
Parking - Organizational Vehicles (SY)	1 YR	187					N/A	
Land (Acres)	1 YR	5.83					N/A	
* Other (Specify)	1 YR	23,792						
						**		

* Passageways, heads, drill deck, garages, gym rooms, crew's lounge, stairwells, conference room

** Acquisition and construction costs for center completed in FY 93 approximately 4.2 million dollars.

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
Classrooms	3264	3264		
Drill hall	2592	2592		
Conference room	480	480		

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: N/A

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?

4. List the location of space outside of the Reserve Command/Center utilized for drilling, if any, by Category Code Number CCN, as described in NAVFAC P-80, and the condition of those resources.

CCN:	Adequate	Substandard	Inadequate
N/A			
Total			

5. 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: N/A

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?

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	1	818	N/A	N/A	106	924
C	N/A					
D	N/A					
E	N/A					
F	N/A					
G	N/A					

SF————Provide gross square feet
General Space-Includes office, storage, work benches and toilets

Facility Types:

Unit Type	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).

CCN	Type of Training Building	Adequate	Substandard	Inadequate
171-17	N/A TV CTR/Instruction Matter			
171-25	N/A Auditorium			
171-36	N/A Radar Simulator Facility			
171-40	Drill Hall	2592		
171-45	N/A Mock-up and Training Aid Preparation Center			
171-50	N/A Small Arms Range - Indoor			
171-60	Recruit Processing Building	300		
171-77	Training Material Storage	600		

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: N/A

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?

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.**

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

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
N/A			

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

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

No aviation units assigned.

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 (ft3)	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. N/A

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

No training area controlled by this command is affected by environmental restrictions.

BERTHING CAPACITY

15. For each **Pier/Wharf** at your facility list the following **structural characteristics**.

Indicate the additional controls required if the pier is inside a Controlled Industrial Area or High Security Area. Provide the average number of days per year over the last eight years that the pier was out of service (OOS) because of maintenance, including dredging of the associated slip:

Table 11.1

Pier/ Wharf & Age1	CCN2	Moor Length (ft)	Design Dredge Depth3 (ft) (MLLW)	Slip Width4 (ft)	Pier Width (ft)5	CIA/Security Area? (Y/N)6	ESQD Limit 7	# Days OOS for maint.
N/A								

1Original age and footnote a list of MILCON improvements in the past 10 years.
2Use NAVFAC P-80 for category code number.
3Comment if unable to maintain design dredge depth
4Water distance between adjacent finger piers.
5Indicate if RO/RO and/or Aircraft access. Indicate if pier structures limit open pier space.
6Describe the additional controls for the pier.
7Net explosive weight. List all ESQD waivers that are in effect with expiration date.

No access to waterfront; therefore, no piers.

16. For each **Pier/Wharf** at your facility list the following **ship support characteristics**:

Table 12.1

Pier/ Wharf	OPNAV 3000.8 (Y/N)	Shore Pwr (KVA) & 4160V (KVA)	Comp. Air Press. & Capacity1	Potable Water (GPD)	CHT (GPD)	Oily Waste1 (gpd)	Steam (lbm/hr & PSI)2	Fendering limits3
N/A								

1List only permanently installed facilities.
2Indicate if the steam is certified steam.
3Describe any permanent fendering arrangement limits on ship berthing.

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 Loading1	Ship Berthing Capacity	Ordnance Handling Pier Capacity2	IMA Maintenance Pier Capacity3
N/A				

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 realingnments**, 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 Loading1	Ship Berthing Capacity	Ordnance Handling Pier Capacity2	IMA Maintenance Pier Capacity3
N/A				

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.

N/A

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.

N/A

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.

N/A

19.d. 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:

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
One	5	480	5	480	8	480
TOTAL	5	480	5	480	8	480

1.2For 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); transhipment/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
Building/Armory	M5 pedestal	mission essential	
Building/Armory	M57 FHT	mission essential	
Building/Armory	M54 LET	mission essential	
Building/Armory	MZ49 Saw	mission essential	
Building/Armory	MZ5Z Mortar	mission essential	
Building/Armory	M16AZ	mission essential	
Building/Armory	Bayonet	mission essential	
Building/Armory	M60E3	mission essential	
Building/Armory	M9 9MM	mission essential	
Building/Armory	K-Bar	mission essential	
Building/Armory	AN/TAS-5	mission essential	

Commodity types currently stowed are indicative of types which can be stowed.

Additional comments:

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
Building/Armory	Non	N/A	N	N	N/A

Location

1. Proximity to Reservists.

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

Based on requests for transfer to IRR, a travel distance of greater than 100 miles discourages participation, due to (1) work conflicts, (2) travel time taking time away from family, (3) lack of identification/involvement with

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

Weighted average for travel time is approximately 65-70 minutes.

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

I-20 exit within 2 miles of center. Closest sea embarkation point would be Houston, TX, approximately 250 miles. Shreveport Regional Airport is approximately 13 miles from center. Nearest AMTRAK station is Marshall, TX, 36 miles west, with very limited service (unmanned stop).

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

This center is not nearby to the mobilization site for any of its units, Naval Hospital Pensacola is the closest, at approximately 600 miles.

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

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.

Lack of maritime access, and associated lack of Naval facilities, reduces opportunity for hands-on training, especially for sea-intensive operations ratings.

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

Increased drilling population while local authorized billets decreasing has resulted in cross-assignment to units with no local equivalent, resulting in fragmentation of training efforts, loss of unit identification, and lower morale for those repeatedly cross-assigned.

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.

No unique features.

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.

Classroom space and administrative facilities adequate for additional reservists, if additional units located here. Able to provide admin/storage space for Coast Guard Reserve Det., if Red River requires navigation aid maintenance.

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

6 undeveloped acres adjacent to reserve center are available.

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: _____

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

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.

New facility
Some opportunities for cross-training/inter-service support available with Barksdale AFB
Virtually co-located with NMCB 28 Reserve Support Site (on Barksdale AFB)

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+				
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: N/A

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?

No military housing controlled by reserve center. Barksdale AFB is nearest facility. No members stationed here are in military housing.

Features and Capabilities

F. Quality of Life (cont.)

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

Pay Grade	Number of Bedrooms	Number on List	Average Wait
O-6/7/8/9	1		
	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.

N/A No units controlled; no personnel in Barksdale AFB 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)?

N/A

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

N/A

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?

N/A

Features and Capabilities

F. Quality of Life (cont.)

(b) BEQ:

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

Type of Quarters	Utilization Rate
Adequate	
Substandard	
Inadequate	

No BEQ facilities controlled by this command; Barksdale AFB has closest units; due to lack of space, not available for Naval Reserve use.

(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? N/A

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

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

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

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 geographic bachelors at this command.

Features and Capabilities

F. Quality of Life (cont.)

(c) BOQ:

No BOQ facilities controlled by this command.

(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? N/A

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

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

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

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 geographic bachelors at this command.

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_____

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

No facilities controlled by this command; nearest facilities located on Barksdale AFB, approximately 7 miles away.

Features and Capabilities

F.. Quality of Life (cont.)

Facility	Unit of Measure	Total	Profitable (Y,N,N/A)
Volleyball CT (outdoor)	Each	1	N/A

Basketball CT (outdoor)	Each		N/A
Racquetball CT	Each		N/A
Golf Course	Holes		N/A
Driving Range	Tee Boxes		N/A
Gymnasium	SF		N/A
Fitness Center	SF		N/A
Marina	Berths		N/A
Stables	Stalls		N/A
Softball Fld	Each		N/A
Football Fld	Each		N/A
Soccer Fld	Each		N/A
Youth Center	SF		N/A
			N/A

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

N/A No library controlled by this command.

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 child care facilities controlled by this command

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

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: N/A

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).

e. Child care regulated by DOD
Maximum capacity at Barksdale AFB is 172 (newborn to age 11)

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

No facilities controlled by this command; nearest facilities located at Barksdale AFB, approximately 7 miles away.

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

City	Distance (Miles)
Shreveport, LA	10
Dallas, TX	210
Batton Rouge, LA	250

Features and Capabilities

C. Quality of Life (cont.)

6. Standard Rate VHA Data for Cost of Living:

Paygrade	With Dependents	Without Dependents
E1	22.04	12.33
E2	22.04	13.86
E3	10.75	7.92
E4	24.78	17.30
E5	13.65	9.53
E6	5.05	3.44
E7	10.41	7.23
E8	0.00	0.00
E9	13.84	10.51
W1	47.81	36.31
W2	20.62	16.17
W3	32.71	26.59
W4	46.18	40.95
O1E	7.13	5.29
O2E	26.23	20.91
O3E	48.94	41.41
O1	24.97	18.40
O2	39.96	31.24
O3	20.33	17.12
O4	1.10	.96
O5	42.14	34.85
O6	26.57	21.99
O7	0.00	0.00

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		$245.00	$60.00
Apartment (1-2 Bedroom)		$365.00	$80.00
Apartment (3+ Bedroom)		$479.00	$70.00
Single Family Home (3 Bedroom)		$350.00	$60.00
Single Family Home (4+ Bedroom)		$450.00	$160.00
Town House (2 Bedroom)			N/A
Town House (3+ Bedroom)			N/A
Condominium (2 Bedroom)			N/A
Condominium (3+ Bedroom)			N/A

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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	98%
Apartment (1-2 Bedroom)	98%
Apartment (3+ Bedroom)	98%
Single Family Home (3 Bedroom)	98%
Single Family Home (4+ Bedroom)	98%
Town House (2 Bedroom)	98%
Town House (3+ Bedroom)	98%
Condominium (2 Bedroom)	98%
Condominium (3+ Bedroom)	98%

(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)	$70,000
Town House (2 Bedroom)	$55,000
Town House (3+ Bedroom)	$62,000
Condominium (2 Bedroom)	$55,000
Condominium (3+ Bedroom)	$62,000

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			
February			
March			
April			
May			
June			
July			
August			
September			
October			
November			
December			

Information not currently available; local sole source is on vacation

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

Increases in personnel at Barksdale AFBm arrival of 3 riverboat casinos employing approximately 5000 personnel, and new business developed in response to expected increase in local tourism have increased demand for a fairly stable supply of housing.

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

Not applicable; reserve center is not co-located with naval base. Only naval billets in area are 9 TAR and 1 USN at center and approximately 10 recruiting MEPS.

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)
Bossier City LA	48%	8	15
Shreveport LA	33%	16	25
Haughton, LA	5%	8	15
Benton, LA	5%	30	40
Waskom, TX	5%	33	40

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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 Cost per Student	1993 Avg SAT/ACT Score	% HS Grad to Higher Educ	Source of Info

Members' children attend public schools K-12 run by Bossier Parish School Board and Caddo Parish School board. State-mandated special education programs are available. Additionally, there are a number of church-affiliated private schools, primarily serving K-8, although at least two offer high school level programs. Listing all schools individually is impractical, as the list fills over three pages in local phone book. Number of children of active duty members has negligible effect on local enrollment and school taxes; any foreseeable increase or decrease in station manning would have no noticeable effect on school costs. Information on average SAT scores and higher education attendees not currently available due to vacation schedules.

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	
Centenary	Day	No	No		Yes	Yes
	Night	No	No		Yes	No
LSUS	Day	No	No		Yes	Yes
	Night	No	No		Yes	Yes
BPCC	Day	No	No		Yes	No
	Night	No	No		Yes	No
Southern U. Shreveport	Day	No	No		Yes	Yes
	Night	No	No		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.

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

This command does not offer on-base programs; nearest base offering programs is Barksdale AFB, approximately 7 miles away.

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				
Manufacturing				
Clerical				
Service				
Other				

Family Service Center provided by Barksdale AFB

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.

None known; Barksdale AFB hospital and dental clinic have been available for sick call, examinations, and treatment.

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.

None known; all family care issues have been satisfactorily handled.

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.

No criminal activity by PCS personnel known.

Crime Definitions	FY 1991	FY 1992	FY 1993
1. Arson (6A)	Ø	Ø	Ø
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.)

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.)

Crime Definitions	FY 1991	FY 1992	FY 1993
9. Larceny - Personal (6T)	Ø	Ø	Ø
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.)

Crime Definitions	FY 1991	FY 1992	FY 1993
13. Extortion (7E)	Ø	Ø	Ø
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.)

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			

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Features and Capabilities

F. Quality of Life (cont.)

Crime Definitions	FY 1991	FY 1992	FY 1993
22. Sex Abuse - Child (8B)	Ø	Ø	Ø
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: NMCRC Bossier City, LA

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.	J B Greene Jr.
Name	Signature
ACTING	13 JUL 1994
Title	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)

Signature

COMMANDER - ACTING
Title

16 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)

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)

TF Hall
Signature

COMMANDER
Title

7/5/94
Date

COMNAVRESFOR
Activity

UIC: 61952

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

LCDR F. HALL
NAME (Please type or print)

F Hall LCDR
Signature

Commanding Officer
Title

15 Jan 94
Date

Naval & Marine Corps Reserve Center, Bossier City, LA
Activity

61944

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CAPACITY ANALYSIS:
DATA CALL WORK SHEET FOR
RESERVE CENTER: NAVAL AND MARINE CORPS RESERVE CENTER BOSSIER CITY LA
ACTIVITY UIC: 61944

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

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

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1INTRODUCTION

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

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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.

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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 (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	2240	3080	3080	3080	3080	3080	3080
Assembly Hall	80	80	88	88	88	88	88
Conference/Classroom	36	36	36	36	36	36	36
Multi-Media Center	NA	NA	NA	NA	NA	NA	NA
Team Training	NA	NA	16	16	16	16	16
Armory	48	48	48	48	48	48	48
Other (designate)	NA	NA	NA	NA	NA	NA	NA

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)				
Classrooms	1992	1993	1994	1995	1997	1999	2001
Assembly Hall	379	378	417	417	417	417	417
Conference/Classroom	25	25	30	30	30	30	30
Multi-Media Center NA	NA	NA	NA	NA	NA	NA	NA
Team Training	NA	NA	137	137	137	137	137
Shops NA	NA	NA	NA	NA	NA	NA	NA
Armory	129	128	137	137	137	137	137
Other (designate)							
CLASSROOMS	379	378	417	417	417	417	417

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
NUMBER OF SELRES	ACTUAL MANNING LEVEL	~~250~~ 266	251 ~~250~~ ~~243~~	274 ~~280~~	220 ~~280~~	220 ~~280~~	220 ~~280~~	220 ~~280~~
	AUTHORIZED BILLETS *	817 ~~132~~	879 ~~132~~	890 ~~123~~	870 ~~114~~	870 ~~114~~	870 ~~114~~	870 ~~114~~
NUMBER OF TARs	ACTUAL MANNING LEVEL	~~9~~ 8	~~10~~ 8	~~10~~ 8	~~9~~ 8	~~9~~ 8	~~9~~ 8	8 ~~9~~
	AUTHORIZED BILLETS	~~9~~ 8	~~9~~ 8	8 ~~9~~	8 ~~9~~	9 ~~9~~	~~9~~ 9	9
USN	ACTUAL MANNING LEVEL	~~1~~ 2	~~1~~ 2	~~1~~ 2	2 ~~1~~	~~1~~ 2	~~1~~ 2	2 ~~1~~
	AUTHORIZED BILLETS	1	1	1	1	1	1	1

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CNSRF
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25 Jun 94

*141 reservists are currently cross-assigned to billets in units located at other naval reserve activities; only 16 are between billets currently. A similar number of cross-assignments is expected through FY2001, unless units are established locally.

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

CATEGORY		FY 1992	FY 1993	FY 1994	FY 1995	FY 1997	FY 1999	FY 2001
NUMBER OF USMCR	ACTUAL MANNING LEVEL	129	128	137	137	137	137	137
	AUTHORIZED BILLETS	173	173	178	178	178	178	178
NUMBER OF FTS	ACTUAL MANNING LEVEL	2	2	1	1	1	1	1
	AUTHORIZED BILLETS	2	2	1	1	1	1	1
USMC	ACTUAL MANNING LEVEL	9	9	10	10	10	10	10
	AUTHORIZED BILLETS	9	9	9	9	9	9	9

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5. Major Equipment: Identify major equipment (tanks, trucks, training craft, aircraft, etc.), if any, used in training at your Reserve Center that require special facilities for storage and maintenance (21x-xx and 4xx-xx Category Code Numbers [CCNs] as listed in the NAVFAC P-72 and described in the NAVFAC P-80, etc.) and give the types and sizes of those facilities needed. Do not include training facilities (171-xx and 179-xx CCNs). Add other types of equipment as needed. Provide facility (dll space) requirements in terms of scuare feet (SF) unless another measure is appropriate; indicate alternate unit of measure if used. **Duplicate this chart as needed to list all equipment..**

Type of Equipment	Number by Type	CCN: 214-10		CCN:		CCN:	
		Number of Facilities	Total SF Required	Number of Facilities	Total SF Required	Number of Facilities	Total SF Required
HUMVEE	14	1	1925				
5 TON TRUCK	1	1	300				
CUCV PICKUP	1	1	100				
TRAILER	1	1	50				

6. Authorized/Directed Drill Utilization Areas. Provide any land and water area requirements for reserve Authorized/Directed Drill Utilization conducted by tour 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
Camp J. T. Robinson, North Little Rock, AR 72118-2200 -Hand Grenade (RG14/15) -Compass Crs (TA21) -Training Areas 7-10, 12, 17	Small Arms Marksmanship Training; Marine Battle Skills Training (i.e. Daytime/Night-time Patrolling/Scouting, Land Navigation, NBC Defense, Handgrenades, First Aid and Field Sanitation).	120 hours (10 IDT periods)
Joint Readiness Training Center (JRTC) & Fort Polk, LA 71459 -Redleg 1 Artillery Impact Area -Ranges 30/30A, 33/33D, -Firing Points 813, 904, 905 -Training Areas Six Mile Creek 1/3-4; Slagle 7-11. -Peason Ridge Training Area	Crew Served Weapons Proficiency/Combat Sustainment Training (i.e. M47 Dragon Medium Antitank Missile, M252 81mm Mortar, M2 HB .50 Cal/M60E3 7.62mm Machinegun; Live Fire Exercises). Battalion Field Exercises (FEX)	240 hours (20 IDT Periods)
Fort Hood, TX 76544 -Robert Gray Army Airfield -Mechanized Maneuver Areas -Curry Mortar Range Complex -Cold Springs Direct Fire CSDF Range	Special Operations Capability (SOC) Testing /Training (i.e. Air Field Seizures); Battalion Field Exercises (FEX); Crew-Served Weapons Live Fire Exercises.	60 hours (5 IDT Periods)
Barksdale Air Force Base, LA 71110 -Warrior Training Complex -Bayou Warrior Training Area -Demolition Range -Small Arms Training Complex -NBC Chamber	M60E3 Machinegun/M249 Squad Automatic Weapon (SAW) Familiarization Fire; NBC Defense Training; Daytime/Nightime Patrol-ling/Scouting/Land Navigation; Platoon Tactical Exercises; Demolitions Training; Water Survival Training.	108 hours (9 IDT Periods)

Note: Hours per fiscal year established by a cumulative 48 Inactive Duty Training (IDT) periods. Remaining IDT periods are accomplished at the home training site.

None of these areas are under the control of this command; they are listed only to demonstrate types of areas used by Marine Corps Reserve unit. Location of reserve center in light industry/residential area obviously prohibits similar activities on land under this command's control.

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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 & MARINE CORPS RESERVE CENTER BOSSIER CITY, SHREVEPORT, LOUISIANA									
	FY 1993		FY 1995		FY 1997		FY 1999		FY 2001	
	BILLETS	MANNING	BILLETS	MANNING	BILLETS	MANNING	BILLETS	MANNING	BILLETS	MANNING
DD-975 O'BRIEN 7510	19	37	0	0	0	0	0	0	0	0
LPD-8 DUBUQUE 810	11	28	0	0	0	0	0	0	0	0
4 MARDIV 1/23 DET W	13	13	12	14	12	14	12	14	12	14
MOBASCONTGRP 1013	0	1	0	3	0	3	0	3	0	3
NMCB 28 DET 0728	1	90	1	95	1	95	1	95	1	95
NMCB 28	752	0	752	0	752	0	752	0	752	0
SIMA SAN DIEGO 410	53	50	70	68	70	68	70	68	70	68
VOLTRAUNIT 1013	0	5	0	8	0	8	0	8	0	8
NH PNCLA P1047	11	6	9	5	9	5	9	5	9	5
NAVAL HOSPITAL PENSACOLA	19	21	26	27	26	27	26	27	26	27
	879	251	570	220						

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
WPNS CO 1/23	173	122	178	137	178	137	178	137	178	137
I-I STAFF	9	10	9	9	9	9	9	9	9	9

Duplicate this char. as necessary to list all units.

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c.

ARMY UNITS	BILLETS AUTHORIZED / ACTUAL MANNING									
	FY 1993		FY 1995		FY 1997		FY 1999		FY 2001	
NA	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 Army units drill at this command, no known future plans for gain of units.

d.

COAST GUARD UNITS:	BILLETS AUTHORIZED / ACTUAL MANNING									
	FY 1993		FY 1995		FY 1997		FY 1999		FY 2001	
NA	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 drill at this command; no known future plans for gain of units.

e.

NATIONAL GUARD UNITS	BILLETS AUTHORIZED / ACTUAL MANNING									
	FY 1993		FY 1995		FY 1997		FY 1999		FY 2001	
NA	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 Guard units drill at this command; no known future plans to gain units.

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f.

AIR NATIONAL GUARD UNITS	BILLETS AUTHORIZED / ACTUAL MANNING									
NA	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 Guard units drill at this command; no airfield available onsite; no known plans to gain units.

g.

JOINT UNITS	BILLETS AUTHORIZED / ACTUAL MANNING									
	FY 1993		FY 1995		FY 1997		FY 1999		FY 2001	
NA	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 drill at this command; no known plans to gain 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?

Three weekends; two for Naval Reserve, one for Marine Corps reserves.

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:	11	N	0	7	280
Assembly Hall	1	N	0	2	80
Conference/Classroom	1	N	0	1	36
Multi-Media Center	NA	NA	NA	NA	NA
Team Training	1	N	*	NA	NA
Shops	NA	NA	NA	NA	NA
Armory	1	N	0	2	48
Other (designate)					

*Armored vehicle team trainer not installed unitl FY 94.

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	6177	6177	6177	6177	6177	6177	6177	6177
CLASSROOMS	3264	3264	3264	3264	3264	3264	3264	3264
TRAINERS	408	408	408	408	408	408	408	408
LABS	NA							
SHOPS	NA							
VEHICLE MAINTENANCE BAYS	924	924	924	924	924	924	924	924
STORAGE	2405	2405	2405	2405	2405	2405	2405	2405
SUPPLY	121	121	121	121	121	121	121	121
Armory	480	480	480	480	480	480	480	480
* OTHER	23,384	23,384	23,384	23,384	23,384	23,384	23,384	23,384
OTHER CCNs*	NA							
TOTAL SQ. FT.	37,163	37,163	37,163	37,163	37,163	37,163	37,163	37,163

* 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.

*Includes passageways, stairwells, heads, locker rooms, garages, conference room, unheated areas converted to workout spaces, reserve recruiters office.

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

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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)
NONE			

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

Airspace Name	Dimensions	Scheduling Agency	Controlling Agency
NONE			

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

Airfield	Location	Ownership (Service/non-DoD)
NONE		

No LZs, GPs, or other land/water utilization areas controlled by this command; training and maintenance buildings, and parking areas use virtually all of approximately 6 acre site.

No aviation units assigned.

TOTAL P.25

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?**

An additional 41 Marine Corps reservists and approximately 180 Navy reservists could be accomodated. For Naval reservists, this would require two units relocated to replace units scheduled for FY 94 disestablishment and about one half of the additional reservists to be suitable for Construction Battalion assignment.

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.

None presently projected.

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).

Increased tourism in area has resulted in difficulty obtaining additional commercial berthing for reservists entitled to it. As local demographics don't provide large population of Naval veterans from which to recruit, increasing population by necessity would mean more commuting reservists, and increased difficulty in obtaining required berthing.

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: NMCRC BOSSIER CITY, LA

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.	J. B. Greene Jr.
Name	Signature
ACTING	14 JUL 1994
Title	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)

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)

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)

Signature

COMMANDER
Title

7/5/94
Date

COMNAVRESFOR
Activity

61944

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

LCDR F. HALL
NAME (Please type or print)

Signature

Commanding Officer
Title

17 Jan 94
Date

Naval & Marine Corps Reserve Center, Bossier City, LA
Activity

DATA CALL 66
INSTALLATION RESOURCES

Activity Information:

Activity Name:	N&MCRC SHREVEPORT, LA
UIC:	61944
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

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: N&MCRC SHREVEPORT, LA		**UIC:** 61944	
Category	**FY 1996 BOS Costs ($000)**		
	Non-Labor	**Labor**	**Total**
1. Real Property Maintenance Costs:			
1a. Maintenance and Repair	7		7
1b. Minor Construction			
1c. Sub-total 1a. and 1b.	7		7
2. Other Base Operating Support Costs:			
2a. Utilities	21		21
2b. Transportation			
2c. Environmental			
2d. Facility Leases	6		6
2e. Morale, Welfare & Recreation			
2f. Bachelor Quarters			
2g. Child Care Centers			
2h. Family Service Centers			
2i. Administration	34		34
2j. Other (Specify) - Basecomm	8		8
2k. Sub-total 2a. through 2j:	69		69
3. Grand Total (sum of 1c. and 2k.):	76		76

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:

Appropriation	Amount ($000)
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: N&MCRC SHREVEPORT, LA		UIC: 61944	
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: N&MCRC SHREVEPORT, LA	**UIC:** 61944
Cost Category	**FY 1996 Projected Costs ($000)**
Travel:	5
Material and Supplies (including equipment):	5
Industrial Fund Purchases (other DBOF purchases):	6
Transportation:	
Other Purchases (Contract support, etc.):	60
Total:	76

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: N&MCRC SHREVEPORT, LA	**UIC:** 61944
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: TF Hall

COMMANDER NAVAL RESERVE FORCE

Title

Date: 7/14/94

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)

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)

Signature

DEPUTY CHIEF OF STAFF

Title

7/13/94

Date

CODE 06

Division

FINANCIAL MANAGEMENT

Department

COMMANDER NAVAL RESERVE FORCE

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.

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: TF Hall

COMMANDER NAVAL RESERVE FORCE

Title

Date: 7/14/94

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: W A Earner

Title _____

Date: 8/8/94

726

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

Activity Name:	NAVAL AND MARINE CORPS RESERVE CENTER BOSSIER CITY,LA
UIC:	61944
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.

Average Appropriated Fund Civilian Salary Rate:	N/A

Source of Data (1.a. Salary Rate): NO CIVILIAN EMPLOYEES AT THIS FACILITY

ORIGINAL

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			
BOSSIER PARISH	LA	12	0	55%	8	20
CADDO PARISH	LA	8	0	36%	8	20
HARRISON COUNTY	TX	1	0	5%	35	35
GREGG COUNTY	TX	1	0	5%	72	70

= 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:

Bossier Parish

Source of Data (1.b. 1) & 2) Residence Data): RECALL ROSTER; PERSONNEL SURVEY

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)
SHREVEPORT	CADDO PARISH	8

Source of Data (1.c. Metro Areas):	Chamber of Commerce

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

Age Category	Number of Employees	Percentage of Employees
16 - 19 Years	0	N/A
20 - 24 Years	0	N/A
25 - 34 Years	0	N/A
35 - 44 Years	0	N/A
45 - 54 Years	0	N/A
55 - 64 Years	0	N/A
65 or Older	0	N/A
TOTAL	0	100 %

Source of Data (1.d.) Age Data: NO CIVIL SERVICE EMPLOYEES

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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.

Last School Year Completed	Number of Employees	Percentage of Employees
8th Grade or less	0	N/A
9th through 11th Grade	0	N/A
12th Grade or High School Equivalency	0	N/A
1-3 Years of College	0	N/A
4 Years of College (Bachelors Degree)	0	N/A
5 or More Years of College (Graduate Work)	0	N/A
TOTAL	0	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.)	0
Associate Degree	0
Bachelor Degree	0
Masters Degree	0
Doctorate	0

Source of Data (1.e.1) and 2) Education Level Data):	NO CIVIL SERVICE EMPLOYEES

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.**

Industry	SIC Codes	No. of Civilians	% of Civilians
1. Agriculture, Forestry & Fishing	01-09	0	N/A
2. Construction (includes facility maintenance and repair)	15-17	0	N/A
3. Manufacturing (includes Intermediate and Depot level maintenance)	20-39		
3a. Fabricated Metal Products (include ordnance, ammo, etc.)	34	0	N/A
3b. Aircraft (includes engines and missiles)	3721 et al	0	N/A
3c. Ships	3731	0	N/A
3d. Other Transportation (includes ground vehicles)	various	0	N/A
3e. Other Manufacturing not included in 3a. through 3d.	various	0	N/A
Sub-Total 3a. through 3e.	20-39	0	N/A
4. Transportation/Communications/Utilities	40-49		
4a. Railroad Transportation	40	0	N/A
4b. Motor Freight Transportation & Warehousing (includes supply services)	42	0	N/A
4c. Water Transportation (includes organizational level maintenance)	44	0	N/A
4d. Air Transportation (includes organizational level maintenance)	45	0	N/A

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4e. Other Transportation Services (includes organizational level maintenance)	47	0	N/A
4f. Communications	48	0	N/A
4g. Utilities	49	0	N/A
Sub-Total 4a. through 4g.	40-49	0	N/A
5. Services	70-89		
5a. Lodging Services	70	0	N/A
5b. Personal Services (includes laundry and funeral services)	72	0	N/A
5c. Business Services (includes mail, security guards, pest control, photography, janitorial and ADP services)	73	0	N/A
5d. Automotive Repair and Services	75	0	N/A
5e. Other Misc. Repair Services	76	0	N/A
5f. Motion Pictures	78	0	N/A
5g. Amusement and Recreation Services	79	0	N/A
5h. Health Services	80	0	N/A
5i. Legal Services	81	0	N/A
5j. Educational Services	82	0	N/A
5k. Social Services	83	0	N/A
5l. Museums	84	0	N/A
5m. Engineering, Accounting, Research & Related Services (includes RDT&E, ISE, etc.)	87	0	N/A
5n. Other Misc. Services	89	0	N/A
Sub-Total 5a. through 5n.:	70-89	0	N/A
6. Public Administration	91-97		
6a. Executive and General Government, Except Finance	91	0	N/A

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6b. Justice, Public Order & Safety (includes police, firefighting and emergency management)	92	0	N/A
6c. Public Finance	93	0	N/A
6d. Environmental Quality and Housing Programs	95	0	N/A
Sub-Total 6a. through 6d.		0	N/A
TOTAL		0	100 %

Source of Data (1.f.) Classification By Industry Data): NO CIVIL SERVICE EMPLOYEES

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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.**

Occupation	Number of Civilian Employees	Percent of Civilian Employees
1. Executive, Administrative and Management	0	N/A
2. Professional Specialty		
2a. Engineers	0	N/A
2b. Architects and Surveyors	0	N/A
2c. Computer, Mathematical & Operations Research	0	N/A
2d. Life Scientists	0	N/A
2e. Physical Scientists	0	N/A
2f. Lawyers and Judges	0	N/A
2g. Social Scientists & Urban Planners	0	N/A
2h. Social & Recreation Workers	0	N/A
2i. Religious Workers	0	N/A
2j. Teachers, Librarians & Counselors	0	N/A
2k. Health Diagnosing Practitioners (Doctors)	0	N/A
2l. Health Assessment & Treating(Nurses, Therapists, Pharmacists, Nutritionists, etc.)	0	N/A
2m. Communications	0	N/A
2n. Visual Arts	0	N/A
Sub-Total 2a. through 2n.:	0	N/A
3. Technicians and Related Support		

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3a. Health Technologists and Technicians	0	N/A
3b. Other Technologists	0	N/A
Sub-Total 3a. and 3b.:	0	N/A
4. Administrative Support & Clerical	0	N/A
5. Services		
5a. Protective Services (includes guards, firefighters, police)	0	N/A
5b. Food Preparation & Service	0	N/A
5c. Dental/Medical Assistants/Aides	0	N/A
5d. Personal Service & Building & Grounds Services (includes janitorial, grounds maintenance, child care workers)	0	N/A
Sub-Total 5a. through 5d.	0	N/A
6. Agricultural, Forestry & Fishing	0	N/A
7. Mechanics, Installers and Repairers	0	N/A
8. Construction Trades	0	N/A
9. Production Occupations	0	N/A
10. Transportation & Material Moving	0	N/A
11. Handlers, Equipment Cleaners, Helpers and Laborers (not included elsewhere)	0	N/A
TOTAL	0	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:	77%
2. Percentage of Military Spouses Who Work Outside of the Home:	59%
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:	10%
3b. Employed "On-Base" - Non-Appropriated Fund:	0%
3c. Employed "Off-Base" - Federal Employment:	0%
3d. Employed "Off-Base" - Other Than Federal Employment	90%

Source of Data (1.h.) Spouse Employment Data): PERSONNEL SURVEY

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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	N/A	N/A	N/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):	MPC - BOSSIER CITY

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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	N/A	N/A	N/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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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.

Source of Data (2.b. 1) & 2) - Regional Table): MPC Bossier City LA

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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:	CADDO	BOSSIER
	3.5%	6.4%

Units for Sale:
2440 units available for sale currently in both parishes.

Source of Data (3.a. Off-Base Housing):	DOUG BIBLE 797-5241

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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). *No maximum capacity stated; portable classrooms and increased pupil-to-teacher ratio are contingency plans for increased population.

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	
ALL	CADDO	42	17	17	51801	*	20/1	*	YES
ALL	BOSSIER	16	7	7	18306	*	19/1	*	YES

* 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): Caddo & Bossier Parish School Board

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 :

BAPTIST CHRISTIAN COLLEGE
BOSSIER PARISH COMMUNITY COLLEGE
CENTENARY COLLEGE OF LOUISIANA
EAST TEXAS BAPTIST UNIVERSITY
LOUISIANA BAPTIST UNIVERSITY
LOUISIANA STATE UNIVERSITY/S'PORT
NORTHWESTERN UNIVERSITY-NURSING DI'
SOUTHERN UNIVERSITY- SHREVEPORT

Source of Data (3.b.3) Colleges):	SHREVEPORT PHONE DIRECTORY

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:

SHREVEPORT BOSSIER'S REGIONAL VOCATIONAL TECHNICAL INSTITUTE

VARIETY OF MAJOR Curricula

Source of Data (3.b.4) Vo-tech Training):	MR. SIMOLKE	(318) 676-7811

CHAMBER OF COMMERCE

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c. **Transportation.**

1) Is the activity served by public transportation?

	Yes	No
Bus:	__	X
Rail:	__	X
Subway:	__	X
Ferry:	__	X

Source of Data (3.c.1) Transportation): PERSONNEL KNOWLEDGE OBSERVATION

2) Identify the location of

THE PUBLIC TRANSPORTATION : N/A

Source of Data (3.c.2) Transportation): NO PUBLIC 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.

SHREVEPORT REGIONAL 11 MILES

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Source of Data (3.c.3) Transportation):	Personal KNOWLEDGE OBSERVATION

4) How many carriers are available at this airport?

8

Source of Data (3.c.4) Transportation):	TELEPHONE LISTINGS SHREVEPORT PHONE DIRECTORY

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

I-20 2 MILES

Source of Data (3.c.5) Transportation):	Personal Observation

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

ADEQUATE FOR RESIDENTIAL AND RESERVE CENTER TRAFFIC

b) Do access roads transit residential neighborhoods?

YES

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

DRAINAGE DITCHES/EASEMENTS ALONGSIDE ROADS

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

RAILROAD CROSSING APPROXIMATELY 1/2 MILE NORTH OF CENTER

Source of Data (3.c.6) Transportation):	PERSONAL KNOWLEDGE/OBSERVATION

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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.

No written agreement for fire protection/HAZMAT. This command treated as normal business.

Source of Data (3.d. Fire/Hazmat):	Bossier City Fire Chief 741-8704

e. **Police Protection.**

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

~~Proprietary~~ CONCURRENT FCH/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.

~~NA~~ EXCLUSIVE, MARINE CORPS TENANT HAS AN ARMORY. FCH, RC-10 8 Jul

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.

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.

NA

Source of Data (3.e. 1) - 5) - Police):	OGC Washington, DC Real Property Jurdisdiction

CNRF 003

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. This activity does not have its own power generation, water supply, refuse disposal, or other utility facilities. All utilities are provided by services from: Swepco Electric, Arkla Gas Inc, City of Bossier Utilities, Water and Sewage, Western Waste Management - Refuse Disposal (W). Contracted thru Civil Engineer Command Southern Division. Charleston S C .

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):	Contracted thru southdiv Charleston SC

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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. BARKSDALE AIR FORCE BASE	Defense	8492
2. STATE OF LOUISIANA	Government	7141
3. CADDO PARISH SCHOOL BOARD	Education	6236
4. LSU MEDICAL CENTER	Medical	5752
5. CITY OF SHREVEPORT	Government	3088
6. GENERAL MOTORS	Automobiles	2919
7. BOSSIER PARISH SCHOOL BOARD	Education	2686
8. SCHUMPERT MEDICAL CENTER	Medical	2595
9. WILLIS KNIGHTON MEDICAL CENTER	Medical	1900
10. ATT CONSUMER PRODUCT	Telephone Equipment	1745

Source of Data (4. Business Profile): CHAMBER OF COMMERCE

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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: ATT REDUCES EMPLOYMENT FROM 7500
FDIC DID COME HERE
THIOKOL IS CLOSING - 1700 EMPLOYEES

b. Introduction of New Businesses/Technologies:
INTERNATIONAL PAPER ADDING 100 EMPLOYEES
GMB BATTERY ADDING 80 EMPLOYEES
FRY MASTER ADDING 200 EMPLOYEES
KCS RAILROAD ADDING 100 EMPLOYEES
BIOMED RESEARCH CENTER 300 EMPLOYEES
GM ADDING 200 EMPLOYEES
3 RIVERBOAT CASINOS
CBA
CFL

c. Natural Disasters:

NONE

d. Overall Economic Trends:

IMPROVING ECONOMY

Source of Data (5. Other Socio/Econ):	Chamber of Commerce

6. Other. Identify any contributions of your activity to the local community not discussed elsewhere in this response. 214 PEOPLE RESIDING GREATER THAN 50 MILES FROM SHREVEPORT TO LOCAL AREA FOR AT LEAST 24 DAYS PER YEAR OVER $58,000 TO LOCAL HOTELS ANNUALLY IN CONTRACTED BERTHING AND OVER $59,600 TO LOCAL Restaurants ANNUALLY IN CONTRACTED MEALS. ALSO PROVIDES FUNERAL HONORS SUPPORT AND HONOR GUARDS.

Source of Data (6. Other):	Personal Knowledge

6. cont. Community activity involvement include: Toys for Tots, assistance in building fully-accessible playground. Provides ID cards/DEERS support/administrative support for: Navy/USMC retirees, active duty on leave, and family members.

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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

Commander - Acting
Title

JUL 0 8 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

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)

Signature

Commander, Naval Reserve Force
Title

7/25/94
Date

1400 Dauphine St.
New Orleans, LA 70146
Activity

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

N61944 NAVMARCORESCEN SHREVEPORT, LA

ORIGINAL

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

F. HALL	
NAME (Please type or print)	Signature
Commanding Officer	JUL 6 1994
Title	Date
NAVMARCORESCEN Bossier City	
Activity	

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DATA CALL 66
INSTALLALATION RESOURSES

-126

Activity Information:

Activity Name:	WPNS CO, 1/23 BOSSIER CITY LA
UIC:	45335
Host Activity Name (if response is for a tenant activity):	NMCRC BOSSIER CITY LA NMCRC SHREVEPORT, LA (NAVY HOST)
Host Activity UIC:	61944

General Instructions/Background. A separte response to this data call must be completed for each Department of the Navy (DON) host, independent and tenant activity which separtely 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 bugdet data supporting the FY 1996 NAVCOMPT Budget Submit. Two tables are provided. Table 1A identifies "Other than DBOF Overhead" BOS costs and Table1B identifies "DBOF Overhead" BOS costs. These tables must be completed, as appropriate, for all DON host, independent or tenant activities which separtely 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). 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 budget 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 activity 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 lines to the table (following line 2j., as necessary, to identify any additional cost elements not currently shown). Leave shaded areas of table blank.

DATA CALL 66
INSTALLATION RESOURCES

TABLE 1A - Base Operating Support Costs (Other Than DBOF Overhead)			
Activity Name: WPNS CO, 1/23 BOSSIER CITY LA		**UIC:** 45335	
Category	**FY 1996 BOS Costs ($000)**		
	Non-Labor	**Labor**	**Total**
1. Real Property Maintenance Costs:			
1a. Maintenance and Repair	$0.00	0.00	$0.00
1b. Minor Construction	0.00	0.00	0.00
1c. Sub-total 1a. and 1b.	**$0.00**	0.00	**$0.00**
2. Other Base Operating Support Costs:			
2a. Utilities	$24,509.80	0.00	$24,509.8
2b. Transportation	$4,392.00	0.00	$4,392.0
2c. Environmental	$0.00	0.00	$0.0
2d. Facility Leases	$0.00	0.00	$0.0
2e. Morale, Welfare & Recreation	$0.00	0.00	$0.0
2f. Bachelor Quarters	$4,636.00	0.00	$4,636.0
2g. Child Care Centers	$0.00	0.00	$0.00
2h. Family Service Centers	$0.00	0.00	$0.00
2i. Administration	$11,382.60	0.00	$11,382.6
2j. Other (Specify)	$11,468.00	0.00	$11,468.0
2k. Sub-total 2a. through 2j :	**$56,388.40**	0.00	**$56,388.4**
3. Grand Total (sum of 1c. and 2k.) :	**$56,388.40**	0.00	**$56,388.40**

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:

Appropriation	Amount ($000)
N/A	

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.

Enclosure (5)

DATA CALL 66
INSTALLATION RESOURCES

Table 1B - Base Operating Support Costs (DBOF Overhead)			
Activity Name: WPNS CO, 1/23 BOSSIER CITY LA		**UIC:** 45335	
Category	**FY 1996 Net Cost From UC/FUND-4 ($000)**		
	Non-Labor	**Labor**	**Total**
1. Real Property Maintenance Costs:			
1a. Real Property Maintenance (>$15K)			N/A
1b. Real Property Maintenance (<$15K)			N/A
1c. Minor Construction (Expensed)			N/A
1d. Minor Construction (Capital Budget)			N/A
1e. Sub-total 1a. through 1d.			N/A
2. Other Base Operating Support Costs:			
2a. Command Office			N/A
2b. ADP Support			N/A
2c. Equipment Maintenance			N/A
2d. Civilian Personnel Services			N/A
2e. Accounting/Finance			N/A
2f. Utilities			N/A
2g. Environmental Compliance			N/A
2h. Police and Fire			N/A
2i. Safety			N/A
2j. Supply and Storage Operations			N/A
2k. Major range Test Facility Base Costs			N/A
2l. Other (Specify)			N/A
2m. Sub-total 2a. through 2l:			N/A
3. Depreciation			N/A
4. Grand Total (sum of 1c., 2m., and 3.):			N/A

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-heading 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. Reger 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 identifed. 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: WPNS CO, 1/23 BOSSIER CITY LA	**UIC:** 45335

Cost Category	**FY 1996 Projected Costs ($000)**
Travel:	$19,107.90
Material and Supplies (including equipment):	$20,543.45
Industrial Fund Purchases (other DBOF purchases):	$0.00
Transportation:	$0.00
Other Purchases (Contract support, etc.):	$16,737.06
Total:	$56,388.40

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 estimat 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. **See note.

Table 3 - Contract Workyears	
Activity Name: WPNS CO, 1/23 BOSSIER CITY LA	**UIC:** 45335
Contract Type	**FY 1996 Estimated Number of Workyears On-Base**
Construction:	N/A
Facilities Support:	N/A
Mission Support:	N/A
Procurement:	N/A
Other: *	N/A
Total Workyears: **	N/A

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

** Contract workyears are insignificant and not recoverable.

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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.?** See Note.

N/A

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)):

N/A

2) Estimated number of workyears which would be eliminated:

N/A

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):

N/A

Note: **Contract workyears are insignificant and not recoverable.

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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**):

**See Note

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

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

Note: **Contract workyears are insignificant and not recoverable.

Enclosure (5)

BRAC-95 CERTIFICATION
DATA CALL: 66
INSTALLATION RESOURCES

I certify that the information contained herein is accurate and complete to the best of my knowledge and belief. The attached 191 formats represent the MARRESFOR site submissions for BRAC 66.

LtCol Steven J. Gaffney
NAME

SIGNATURE

Assistant Chief of Staff, Comptroller
TITLE

20 Sept '94
DATE

Comptroller
DEPARTMENT

MARRESFOR
ACTIVITY

Enclosure (2)

BRAC-95 CERTIFICATION
DATA CALL: 66
INSTALLATION RESOURCES

I certify that the information contained herein is accurate and complete to the best of my knowledge and belief. The attached 191 formats represent the MARRESFOR site submissions for BRAC 66.

J. E. LIVINGSTON
NAME

SIGNATURE

COMMANDING GENERAL
TITLE

26 Sept 94
DATE

COMMAND
DEPARTMENT

MARRESFOR
ACTIVITY

Enclosure (1)

Data Call 66
MARRESFOR

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 of print

Signature

Title

Date

Activity

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

MAJOR CLAIMANT LEVEL

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 belief.

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

NAME (Please type of print

Signature

LA BRABHAM
LIEUTENANT G[illegible] MARINE CORPS
DEPUTY CHIE[illegible]
INSTALLATIONS AND [illegible]S

Title

10/25/94

Date

Document Separator

#49

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ORIGINAL

MILITARY VALUE ANALYSIS:
DATA CALL WORK SHEET FOR
RESERVE CENTER: NAVAL & MARINE CORPS RESERVE CENTER, BOISE, ID
ACTIVITY UIC: 62139

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

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

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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

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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.

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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 & MARINE CORPS RESERVE CENTER, BOISE, ID PROVIDES A CENTRAL SITE FOR THE ADMINISTRATIVE SUPPORT AND MOBILIZATION OF SELECTED RESERVES ASSIGNED. TRAINING ASSETS ARE AVAILABLE TO PROVIDE EDUCATION IN GENERAL MILITARY, BASIC MAINTENANCE, BASIC LIFE SUPPORT AND OTHER ELEMENTARY TRAINING TOPICS IN ADDITION TO IMPORTED CURRICULA AND INSTRUCTORS. FULL MAINTENANCE AND STORAGE FACILITIES EXIST IN SUPPORT OF ASSIGNED USMC TANKS, VEHICLES AND PERSONNEL.

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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 x 48 x 16 = 3840.

Purpose of Utilization	Student Throughput	# of Uses	Drill Space Utilized	Facility (space) Hours
MUSTER	285	192	DRILL HALL	200
DIRECTED TRAINING	168	24	DRILL HALL	72
UNIT TRAINING	285	48	CLASSROOMS	288
SECURITY TRAINING	10	12	SECURITY SPACE	84
ADMIN TRAINING	25	48	ADMIN SPACES	288
PHYSICALS	285	24	MEDICAL SPACE	78
RIP PROJECTS	8	12	MAINT BLDG	90

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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
NONE		

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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
NONE		

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.

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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
CG-55	USNR	82909	33	2	0
SIMA	USNR	88210	24	4	0
SEC GRU	USNR	88886	10	1	0
DDD PUGET SOUND	USNR	89529	12	1	0
FH CBTZ-5	USNR	89756	27	2	0
VTU	USNR	22026	8	0	0
RAMCB-18	USNR	85178	39	0	0
CHB-5	USNR	86141	16	0	0
Co "C"	USMCR	21444	117	14	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
ARMY NAT'L GUARD	CLASSROOMS/DRILLHALL/ADMIN SPACES 2WKS/YR
NAVAL SEA CADETS	CLASSROOMS/DRILL HALL 24 DAYS/YR
BOISE STATE UNIV.	ONE CLASSROOM 36 DAYS/YR

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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	SITE		
(Navy or Marine Corps	Reserve Command/Center	Gaining Command	Other Site
FLT CBTZ-9 (NAVY)	60%	30%	10%
CG-55 (NAVY)	75%	25%	0
SIMA (NAVY)	70%	20%	10%
DDD PUGET SOUND (NAVY)	70%	25%	5%
SECGRU (NAVY)	65%	30%	5%
RNMCB-18 (NAVY)	70%	30%	0

d. For fiscal years 1991, 1992 and 1993, how many reservists <u>not assigned</u> 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.

FLT HOSPITAL UNIT 10% SUPPORT TO MT. HOME A.F.B. HOSPITAL
DDD PUGET SOUND UNIT 5% SALT LAKE CITY SUPPLY DEPOT
SIMA PEARL HARBOR UNIT 5% GOWEN FIELD, AIR NAT'L GUARD BASE
5% SIMA SAN DIEGO

SECGRU UNIT 5% PROGREP SAN FRANCISCO, CA

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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.

GOWEN FIELD, BOISE, ID - CO LOCATED
MT HOME AFB
MT HOME TANK TRAINING RANGE

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	18
ENLISTED	52

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.)

WITHIN 5 HRS DRIVE OF IDAHO NUCLEAR ENG. LAB WITH LARGE POPULATION OF NAVY TRAINED NUCLEAR PERSONNEL.

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

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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.

RESERVE CENTER IS ABLE TO PROVIDE LIMITED MEDICAL SUPPORT, STATION VEHICLES AND USMC ROLLING STOCK FOR SUPPORT.

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.)

" CAMPAIGN DRUG PRESENTATIONS (1,100 STUDENTS IN FY 94), 15 FUNERALS, NAVY LEAGUE MEETINGS, AND VETERANS ADMINISTRATION USE.

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

NONE

62139

BRAC #49 UIC: 62139
NAVAL & MARINE CORPS RESERVE CENTER, BOISE, ID
(703) 696-2141
ATTN: CDR Bill Hendrix

725

2. **Demographics** (Duplicate all charts as necessary)

a. List the average travel distances of Reservists and number that travel those average distances.

	0 - 50 miles	51 - 100 miles	100+ miles
# of Personnel	249	20	17

b. List all military Guard and Reserve Command/Centers and distance within 100 miles of your Reserve Command/Center:

Name of Center	miles
AIR NATIONAL GUARD 142FG/190FS BOISE,ID.	1/4 MILE
AIR NATIONAL GUARD 189th FTU/F4-G BOISE, ID	1/4 MILE
US ARMY RESERVE CENTER BOISE, ID	1/8 MILE

c. List all military Guard and Reserve Command/Centers between 100 and 200 miles of your Reserve Command/Center:

Name of Center	miles
NONE	

d. List all of 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.)

Name of Center	Miles	Resources Shared
NONE		

Pg __ of __
UIC: _____

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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 (YR'S)	Ad-equate	Substan-dard	Inad-equate	Total	Plant Value	Leased Property (SF)	Cost of Leas Property
Admin	7	1900						
Classrooms	7	2500						
Trainers	7	500						
Labs	7							
Shops	7	X						
Bays	7	X						
Storage	7	1100						
Supply	7	1700						
Pistol Range (# of Facilities)	N/A							
Other Ranges (Specify) (# of Facilities)	N/A							
Armory	7							
Parking - POV (Sq. Yds. (SY))	7	75						
Parking - Organizational Vehicles (SY)	7	260						
Land (Acres)	7	4						
Other (Specify)								

Tenant of Mountain Home A.F.B

62139

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
MAIN BLDG	26,137	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: NONE

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?

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4. List the location of space outside of the Reserve Command/Center utilized for drilling, if any, by Category Code Number CCN, as described in NAVFAC P-80, and the condition of those resources.

CCN: NONE	Adequate	Substandard	Inadequate
Total			

5. 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?

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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						
B						
C	2	1010	2	1010	350	2370
D						
E						
F						
G						

SF----------Provide gross square feet
General Space-Includes office, storage, work benches and toilets

Facility Types:

Unit Type	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

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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).

CCN	Type of Training Building	Adequate	Substandard	Inadequate
171-17	TV CTR/Instruction Matter	50		
171-25	Auditorium			
171-36	Radar Simulator Facility			
171-40	Drill Hall	2100		
171-45	Mock-up and Training Aid Preparation Center	450		
171-50	Small Arms Range - Indoor			
171-60	Recruit Processing Building	230		
171-77	Training Material Storage	95		

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?

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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.**

CCN	Training Facilities	Number of Facilities NONE		
		Adequate	Substandard	Inadequate
179-35	Weapons Range Operations Tower	NONE		
179-40	Small Arms Range - Outdoor	NONE		
179-45	Training Mock-Ups	NONE		
179-50	Training Course	NONE	/	/
179-55	Combat Training Pool/Tank	NONE		
179-60	Parade and Drill Field	NONE	/	/
179-71	Electronic Warfare Training Range	NONE		
179-72	Underwater Tracking/Training Range	NONE		

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?

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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 (ft3)	Estimated Down Time
NONE				

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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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Indicate the additional controls required if the pier is inside a Controlled Industrial Area or High Security Area. Provide the average number of days per year over the last eight years that the pier was out of service (OOS) because of maintenance, including dredging of the associated slip:

Table 11.1 NONE

Pier/ Wharf & Age1	CCN2	Moor Length (ft)	Design Dredge Depth3 (ft) (MLLW)	Slip Width4 (ft)	Pier Width (ft)5	CIA/Security Area? (Y/N)6	ESQD Limit 7	# Days OOS for maint.

1Original age and footnote a list of MILCON improvements in the past 10 years.
2Use NAVFAC P-80 for category code number.
3Comment if unable to maintain design dredge depth
4Water distance between adjacent finger piers.
5Indicate if RO/RO and/or Aircraft access. Indicate if pier structures limit open pier space.
6Describe the additional controls for the pier.
7Net explosive weight. List all ESQD waivers that are in effect with expiration date.

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16. For each **Pier/Wharf** at your facility list the following **ship support characteristics:** N/A

Table 12.1

Pier/ Wharf	OPNAV 3000.8 (Y/N)	Shore Pwr (KVA) & 4160V (KVA)	Comp. Air Press. & Capacity1	Potable Water (GPD)	CHT (GPD)	Oily Waste1 (gpd)	Steam (lbm/hr & PSI)2	Fendering limits3

1List only permanently installed facilities.
2Indicate if the steam is certified steam.
3Describe any permanent fendering arrangement limits on ship berthing.

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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. N/A

Table 13.1

Pier/ Wharf	Typical Steady State Loading1	Ship Berthing Capacity	Ordnance Handling Pier Capacity2	IMA Maintenance Pier Capacity3

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.

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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 realingnments**, state the expected normal **loading**, the maximum capacity for berthing, maximum capacity for weapons handling evolutions, and maximum capacity to conduct intermediate maintenance. N/A

Table 14.1

Pier/ Wharf	Typical Steady State Loading1	Ship Berthing Capacity	Ordnance Handling Pier Capacity2	IMA Maintenance Pier Capacity3

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.

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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.

N/A

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.

N/A

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.

N/A

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

N/A

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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:

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
BUD 800	1.5	400	1.5	400	4.0	408
TOTAL						

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1.2For 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); transhipment/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
ARMORY	SMALL ARMS	USMC	SMALL ARMS

Additional comments:

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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.

THIS NEWER FACILITY IS IDEALLY SUITED TO ADMINISTER AND MUSBILIZE RESERVES. TRAINING IS SOMEWHAT DEGRADED DUE TO DISTANCE TO MAJOR FLEET TRAINING AREAS.

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

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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
Armory	1.2	Y	N	N/A	

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Location

1. **Proximity to Reservists.**

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

BOISE IS THE BUSINESS, SOCIAL, POLITICAL AND CULTURAL CENTER FOR THIS GEOGRAPHIC AREA.

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

30 MINUTES

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

AIR, RAIL AND GROUND NODES ARE COLOCATED.
SEA NODE IS 7 HOURS DRIVE BY INTERSTATE HIGHWAY TO PORTLAND, OR

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

CLOSE PROXIMITY TO AIRLIFT FACILITIES (MT. HOME AFB) 45 MILES. RESERVE CENTER IS THE KEY TRANSPORTATION HUB FOR THIS GEOGRAPHIC AREA.

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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?

NONE

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

NONE

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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: _____

Land Use	Total Acres	Developed	Available for Development	
			Restricted	Unrestricted
Operational	0	0	0	
Training	1.0	1.0	0	
Maintenance	.7	.7	0	
Research & Development	0	0	0	
Supply and Storage	.8	.8	0	
Admin	.4	.4	0	
Housing	0	0	0	
Recreational	.1	.1	0	
Navy Forestry Program	0	0	0	
Navy Agricultural Outlease Program	0	0	0	
Hunting/fishing Programs	0	0	0	
Other	.5	.5		.5
TOTAL	3.5	3.5	0	.5

Features and Capabilities

E. Ability for Expansion (cont.)

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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+	NONE			
Officer	3	NONE			
Officer	1 or 2	NONE			
Enlisted	4+	NONE			
Enlisted	3	NONE			
Enlisted	1 or 2	NONE			
Mobile Homes		NONE			
Mobile Home lots		NONE			

(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?

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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	N/A
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)?

N/A

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

Type of Quarters	Utilization Rate
Adequate	N/A
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?

N/A

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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.

YES, ONLY DRILL ONE WEEKEND/MONTH AND CAN ACCOMODATE LARGER POPULATIONS/MISSIONS

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

NONE

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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.

THIS FACILITY IS WELL SUITED FOR A VARIETY OF MISSIONS, INCLUDING OFFICE SPACE, CLASSROOMS, A DRILL HALL (GYM), LOCKER ROOMS W/ SHOWERS, STORAGE SPACES, MAINTENANCE FACILITY (4 BAYS FOR M-1 TANKS) AND ADEQUATE PARKING FOR ONE HUNDRED FIFTY CARS

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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	N/A	
	2		
	3		
	4+		
O-4/5	1	N/A	
	2		
	3		
	4+		
O-1/2/3/CWO	1	N/A	
	2		
	3		
	4+		
E7-E9	1	N/A	
	2		
	3		
	4+		
E1-E6	1	N/A	
	2		
	3		
	4+		

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Features and Capabilities

F. Quality of Life (cont.)

(b) BEQ: N/A

(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? N/A

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

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

(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	0		
TOTAL	0	100	

(5) How many geographic bachelors do not live on base? N/A

Base not provide living Quarters

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Features and Capabilities

F. Quality of Life (cont.)

(c) BOQ: N/A

(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? N/A

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

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

(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	0		
TOTAL	0	100	

(5) How many geographic bachelors do not live on base? N/A

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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 Boise, ID DISTANCE_____

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	2,000	Y
Officer's Club	SF	1,500	Y
Library	SF	0	
Library	Books	0	
Theater	Seats	0	
ITT	SF	0	
Museum/Memorial	SF	0	
Pool (indoor)	Lanes	0	
Pool (outdoor)	Lanes	4	N
Beach	LF	0	
Swimming Ponds	Each	0	
Tennis CT	Each	0	

Features and Capabilities

F.. Quality of Life (cont.)

Facility	Unit of Measure	Total	Profitable (Y,N,N/A)
Volleyball CT (outdoor)	Each	1	N/A

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Basketball CT (outdoor)	Each	1	N/A
Racquetball CT	Each	0	
Golf Course	Holes	0	
Driving Range	Tee Boxes	0	
Gymnasium	SF	1	N/A
Fitness Center	SF	0	
Marina	Berths	0	
Stables	Stalls	0	
Softball Fld	Each	4	N/A
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

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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	0					
6-12 Mos	0					
12-24 Mos	0					
24-36 Mos	0					
3-5 Yrs	0					

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).

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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	1600 SF	1
Gas Station	SF	0
Auto Repair	SF	0
Auto Parts Store	SF	0
Commissary	SF	0
Mini-Mart	SF	0
Package Store	SF	0
Fast Food Restaurants	Each	0
Bank/Credit Union	Each	0
Family Service Center	SF	0
Laundromat	SF	0
Dry Cleaners	Each	0
ARC	PN	0
Chapel	PN	0
FSC Classrm/Auditorium	PN	0

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

City	Distance (Miles)
BOISE, ID	1/2
MERIDIAN	13
EAGLE	17

Features and Capabilities

C. Quality of Life (cont.)

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6. Standard Rate VHA Data for Cost of Living:

Paygrade	With Dependents	Without Dependents
E1		
E2		
E3		
E4	25.75	17.97
E5	92.84	64.82
E6	95.51	65.02
E7	123.10	85.51
E8		
E9		
W1		
W2		
W3		
W4		
O1E		
O2E		
O3E		
O1		
O2		
O3	61.71	51.95
O4	71.07	61.80
O5	75.32	62.29
O6		
O7		

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

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March 1994.

Type Rental	Average Monthly Rent		Average Monthly Utilities Cost
	Annual High	Annual Low	
Efficiency	300	250	40
Apartment (1-2 Bedroom)	550	450	45
Apartment (3+ Bedroom)	800	700	80
Single Family Home (3 Bedroom)	~~[illegible]~~ 850	~~[illegible]~~ 650	90
Single Family Home (4+ Bedroom)	~~[illegible]~~ 1200	~~[illegible]~~ 1100	120
Town House (2 Bedroom)	800	550	60
Town House (3+ Bedroom)	900	550	85
Condominium (2 Bedroom)	750	500	60
Condominium (3+ Bedroom)	800	550	85

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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	97%
Apartment (1-2 Bedroom)	95%
Apartment (3+ Bedroom)	94%
Single Family Home (3 Bedroom)	96%
Single Family Home (4+ Bedroom)	100%
Town House (2 Bedroom)	94%
Town House (3+ Bedroom)	96%
Condominium (2 Bedroom)	94%
Condominium (3+ Bedroom)	96%

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

Type of Home	Median Cost
Single Family Home (3 Bedroom)	96,000
Single Family Home (4+ Bedroom)	150,000
Town House (2 Bedroom)	72,000
Town House (3+ Bedroom)	89,000
Condominium (2 Bedroom)	73,000
Condominium (3+ Bedroom)	88,000

Features and Capabilities

F. Quality of Life (cont.)

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(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	8	1	0
February	11	1	0
March	11	2	0
April	21	4	0
May	24	4	0
June	23	3	0
July	25	5	0
August	18	4	0
September	17	3	0
October	18	2	0
November	11	1	0
December	6	1	0

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

SIGNIFICANT GROWTH OF BUSINESS IN AREA HAS CONTRIBUTED TO A REAL ESTATE BOOM. ANNUAL APPRECIATION IS 7-10%

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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
BM	0	1
OS	0	1
SK	0	1
HM	0	1
EN	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)
BOISE	50	8	15
NAMPA	25	16	20
MERIDIAN	12	13	20
EAGLE	12	17	25

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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 Cost per Student	1993 Avg SAT/ACT Score	% HS Grad to Higher Educ	Source of Info
Boise High School	PUBLIC	9-12	N	Ø	1117	85	IDAHO Statesman
BISHOP KELLY	PRIVATE	1-12	Y*	2400	1150	98	MOI
WEST JR High	Public	6-8	N	Ø	—	—	IDAHO STATESMAN
MERIDIAN Academy	Public	9-12	Y**	Ø	1125	75	IDAHO STATESMAN
Longfellow Elementary	Public	K-5	N	0	—	—	IDAHO STATESMAN

* - Gifted Children Education

** - Troubled Teens special Education Program.

N62139 NMCRC BOISE, ID.

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	
BOISE STATE UNIV.	Day	Y	Y	Y	Y	Y
	Night	Y	Y	Y	Y	Y
	Day					
	Night					
	Day					
	Night					
	Day					
	Night					

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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	
BOISE STATE UNIV	Day	N	N	N	N	N
	Night	Y	N	Y	Y	N
	Corres-pondence	N/A	N/A	N/A	N/A	N/A
	Day					
	Night					
	Corres-pondence					
	Day					
	Night					
	Corres-pondence					
	Day					
	Night					
	Corres-pondence					

NOTE: NO OTHER ADULT SCHOOLS IN LOCAL COMMUTING AREA.

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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 N/A			Local Community Unemployment Rate
	1991	1992	1993	
Professional				4
Manufacturing				6
Clerical				5
Service				3
Other				0

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.

YES, MILITARY HEALTH CARE AT MT. HOME AFB IS 45 MILES AWAY, REQUIRES FREQUENT TRIPS FOR INITIAL SCREENINGS, ETC. NOT ALL SERVICES AVAILABLE

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.

YES, SAME AS #12 ABOVE

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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

Crime Definitions	FY 1991	FY 1992	FY 1993
1. Arson (6A)	Ø	Ø	Ø
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			

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Features and Capabilities

F. Quality of Life (cont.)

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			

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62134

Features and Capabilities

F. Quality of Life (cont.)

Crime Definitions	FY 1991	FY 1992	FY 1993
9. Larceny - Personal (6T)	Ø	Ø	Ø
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			

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62139

Features and Capabilities

F. Quality of Life (cont.)

Crime Definitions	FY 1991	FY 1992	FY 1993
13. Extortion (7E)	Ø	Ø	Ø
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			

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62139

Features and Capabilities

F. Quality of Life (cont.)

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			

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Features and Capabilities

F. Quality of Life (cont.)

Crime Definitions	FY 1991	FY 1992	FY 1993
22. Sex Abuse - Child (8B)	Ø	Ø	Ø
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			

THE EIGHT ASSIGNED ACTIVE DUTY STAFF MEMBERS OF THIS RESERVE CENTER WERE NOT SUBJECT TO ANY OF THE CRIME CATEGORIES ABOVE. NO CIVILIANS ASSIGNED.

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62139

BRAC-95 CERTIFICATION

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

GARY W. GEAR
NAME (Please type or print)

Signature

COMMANDING OFFICER
Title

6/15/94
Date

N/A
Division

N/A
Department

NAVAL & MARINE CORPS RESERVE CENTER, BOISE, IDAHO
Activity

4607 COPIES

Data Call 49 Activity: NMCRC Boise, ID

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	Signature
ACTING	15 JUL 1994
Title	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)

CAPT. S.M. BROOKER
NAME (Please type or print)

SMBrooker
Signature

Commander, Acting
Title

6/18/94
Date

NAVAL RESERVE READINESS
COMMAND REGION TWENTY-TWO
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

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
NAME (Please type or print)

TF Hall
Signature

Title

7/5/94
Date

Commander, Naval Reserve Force
4400 Dauphine St.
New Orleans, LA 70146
Activity

4607 COPIES

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

GARY W. GEAR
NAME (Please type or print)

Signature

COMMANDING OFFICER
Title

6/15/94
Date

NAVAL & MARINE CORPS RESERVE CENTER, BOISE, IDAHO
Activity

4607 COPIES

UIC: 62139
BOISE, ID
#49

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

NEXT ECHELON LEVEL (if applicable)

CAPT. S.M. BROOKER
NAME (Please type or print)

SMBrooker
Signature

Commander, Acting
Title

6/18/94
Date

NAVAL RESERVE READINESS
COMMAND REGION TWENTY-TWO
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

03 NOV 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
NAME (Please type or print)

TFHall
Signature

COMMANDER, NAVAL RESERVE FORCE
Title

11/21/94
Date

DIRECTOR OF THE NAVAL RESERVE (CNO N095)
Activity

UIC: 62139
D.C. #49

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

GARY W. GREAR
NAME (Please type or print)

Signature

COMMANDING OFFICER
Title

6/20/94
Date

NAVAL & MARINE CORPS RESERVE CENTER, BOISE, ID
Activity

10/24/94

725

DATA CALL 66
INSTALLATION RESOURCES

Activity Information:

Activity Name:	N&MCRC BOISE, ID
UIC:	62139
Host Activity Name (if response is for a tenant activity):	AIR NATIONAL GUARD BASE, BOISE
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

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: N&MCRC BOISE, ID		**UIC:** 62139	
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	19		19
2b. Transportation			
2c. Environmental			
2d. Facility Leases			
2e. Morale, Welfare & Recreation			
2f. Bachelor Quarters			
2g. Child Care Centers			
2h. Family Service Centers			
2i. Administration	42		42
2j. Other (Specify) - Basecomm	4		4
2k. Sub-total 2a. through 2j:	65		65
3. Grand Total (sum of 1c. and 2k.):	71		71

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:

Appropriation	Amount ($000)
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: N&MCRC BOISE, ID		UIC: 62139	
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.) :			

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: N&MCRC BOISE, ID	**UIC:** 62139

Cost Category	FY 1996 Projected Costs ($000)
Travel:	7
Material and Supplies (including equipment):	8
Industrial Fund Purchases (other DBOF purchases):	6
Transportation:	
Other Purchases (Contract support, etc.):	50
Total:	71

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: N&MCRC BOISE, ID	**UIC:** 62139
Contract Type	**FY 1996 Estimated Number of Workyears On-Base**
Construction:	
Facilities Support:	
Mission Support:	.9
Procurement:	
Other:*	
Total Workyears:	.9

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

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)): .9

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

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: T F Hall

COMMANDER NAVAL RESERVE FORCE

Title

Date: 7/14/94

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)

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: TF Hall

COMMANDER NAVAL RESERVE FORCE

Title

Date: 7/14/94

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: W A Earner

Title _____

Date: 8/8/94

725

Activity: 62139

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 and Marine Corps Reserve Center, Boise, ID
Acronym(s) used in correspondence	NAVMARCORESCEN, Boise
Commonly accepted short titles	NMCRC Boise

* Complete mailing address: Commanding Officer
NAVMARCORESCEN
4087 W. Harvard
Boise, ID 83705-6507

* PLAD: NAVMARCORESCEN BOISE ID

* PRIMARY UIC: 62139 (Plant Account UIC for Plant Account Holders) Enter this number as the Activity identifier at the top of each Data Call response page.

* ALL OTHER UIC(s): N\A PURPOSE: N\A

2. PLANT ACCOUNT HOLDER:
* Yes X No ___ (check one)

Activity: 62139

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 _X_ 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 _X_ (check one)

Primary Host (current) UIC: __NA___

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

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

* **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 _X_ (check one)

Activity: 62139

Data Call 1: General Installation Information, continued

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.

Name	Location	UIC
N/A		

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

Name	UIC	Location	Host name	Host UIC
N/A				

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.

N\A

Activity: 62139

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

* PROVIDE FACILITIES FOR TRAINING OF NAVAL RESERVE SELECTED RESERVE.
* PROVIDE ADMINISTRATIVE SUPPORT FOR NAVAL RESERVE SELECTED RESERVE AND INDIVIDUAL READY RESERVE (IRR).
* PROVIDE CENTRAL ADMINISTRATION SITE FOR MOBILIZATION OF ASSIGNED NAVAL RESERVES.
* PROVIDE TRAINED UNITS AND QUALIFIED RESERVE PERSONNEL FOR ACTIVE DUTY IN THE NAVAL FORCES IN TIME OF WAR OR NATIONAL EMERGENCY.
* PLAN, SCHEDULE, EXECUTE ALL TRAINING REQUIREMENTS OF RESERVE PERSONNEL ASSIGNED TO UNITS ATTACHED.

Projected Missions for FY 2001

*

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

* AMC CNSRF 331 3 Feb 94

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

* NAVAL RESERVE SECURITY GROUP UNIT PROVIDES ON CALL LINGUISTIC SUPPORT (4 LANGUAGES) TO NATIONAL SECURITY GROUP HEADQUARTERS.

*

*

Projected Unique Missions for FY 2001

* NAVAL RESERVE SECURITY GROUP UNIT PROVIDES ON CALL LINGUISTIC SUPPORT (4 LANGUAGES) TO NATIONAL SECURITY GROUP HEADQUARTERS.

*

*

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 NAVRESREDCOMREG 22	UIC 68328
* Funding Source NAVRESREDCOMREG 22	UIC 68328

Activity: 62139

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.)

On Board Count as of 01 January 1994

	Officers	Enlisted	Civilian (Appropriated)
*Reporting Command	1	~~12~~ 8	0
*Selected Reserves	32	152	
*Tenants (total)	1	14	0
*Selected Reserves	3	104	

AMC CNSRF 331 3 Feb 94

Authorized Positions as of 30 September 1994

	Officers	Enlisted	Civilian (Appropriated)
*Reporting Command	1	~~12~~ 9	0
*Selected Reserves	21	124	
*Tenants (total)	1	14	0
*Selected Reserves	5	104	

AMC CNSRF 331 3 Feb 94

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.

Title/Name	Office	Fax	Home
* CO/OIC			
CDR GARY W. GEAR	DSN 941-6289 (208)389-6289	(208)389-6294	(208)939-8512
* Duty Officer			[N/A]
ENC L.D. REINHART	(208)389-6289		(208)378-1267

Activity: 62139

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)

Tenant Command Name	UIC	Officer	Enlisted	Civilian
COMPANY C, 4th Tank BN	87296	1	14	0

* Tenants residing on main complex (homeported units.)

Tenant Command Name	UIC	Officer	Enlisted	Civilian
N/A				

* 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).

Tenant Command Name	UIC	Location	Officer	Enlisted	Civilian
N/A					

* Tenants (Other than those identified previously)

Tenant Command Name	UIC	Location	Officer	Enlisted	Civilian
N/A					

Data Calls 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 (include mechanism such as ISSA, MOU, etc.)
N/A		
e.g. DLA (DoD Agency Name) N/A	Somewhere, CA	Purchasing/ contract Administration and public works support - ISSA.
N/A		

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. (Provide 12 copies.)

* 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). (Provide in two sizes: 36"x 42" (2 copies, if available); and 11"x 17" (12 copies).)

* 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. (Provide 12 copies of each, 8½"x 11".)

* Air Installations Compatible Use Zones (AICUZ) Map. (Provide 12 copies.)

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

G. W. GEAR
NAME (Please type or print)

Signature

COMMANDING OFFICER
Title

25 JANUARY 1994
Date

NAVMARCORESCEN BOISE ID
Activity

RC 20 BASE

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

NEXT ECHELON LEVEL (if applicable)

K. W. MILLER CAPT/USNR
NAME (Please type or print)

Signature

DEPUTY COMMANDER ACTING CDR
Title

31 JAN 94
Date

NAVRESREDCOMREG 22
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
Title

2 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
Title

2/10/94
Date

4400 Dauphine St.
New Orleans, LA 70146
Activity

NMCRC BOISE

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)

Signature

Acting
Title

15 Feb 1994
Date

NMCRC BOISE

125

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

ORIGINAL

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.

USMCR CO C 4TH TNK BAT 07296

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)
example: Haliaeetus leucocephalus - bald eagle	*threatened*	*Federal*	*25*	*0*
NONE				

Source Citation:_____

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/(NO)
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/(NO)

OPTIONAL FORM 99 (7-90)

FAX TRANSMITTAL

# of pages ▶ 20

To BJU Group

Dept./Agency

From Nancy Boik

Phone #

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.

NONE

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/(NO)
Has a wetlands survey in accordance with established standards been conducted for your base?	(YES)/NO
When was the survey conducted or when will it be conducted? 09/17/91	
What percent of the base has been surveyed?	100%
What is the total acreage of jurisdictional wetlands present on your base?	[redacted]

Source Citation: ENVIRONMENTAL ASSESSMENT AIRCRAFT CONVERSION AND RELATED ACTIVITIES GOWEN FIELD, ID IF 9/17/91 SECTION 3.4.3

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/(NO)

YES/NO

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.	YES/NO

3c.

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

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			

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

Are there any current or programmed projects to correct deficiencies or improve the facility. No

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

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

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

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.

.01 MGD

4f.

Does your base operate an Industrial Waste Treatment Plant (IWTP)?					YES / NO
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.

4h.

Does your base operate drinking Water Treatment Plants (WTP)?					YES / NO
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.

BOISE WATER CORPORATION - UNLIMITED

4j.

Does the presence of contaminants or lack of supply of water constrain base operations. Explain.	YES/NO

4k.

Other than those described above does your base hold any NPDES or stormwater permits? If YES, describe permit conditions.	YES/NO
If NO, why not and provide explanation of plan to achieve permitted status.	

NPDES PERMIT IS MAINTAINED BY BOISE AIRPORT

4l.

	YES/NO
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/NO

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 FY1997 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. NO

5. AIR POLLUTION

5a.

What is the name of the Air Quality Control Areas (AQCAs) in which the base is located? IDAHO AIR QUALITY BUREAU
Is the installation or any of its OLFs or non-contiguous base properties located in different AQCAs? NO . List site, location and name of AQCA.

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.

Site: NAVY & MARINE CORPS RESERVE CENTER AQCA: IDAHO A.Q. BUREAU (*REG. 64

Pollutant	Attainment	Non-Attainment	Maintenance	Target Attainment Year[1]	Comments[2]
CO	X				
Ozone	X				
PM-10	X				
SO_2	X				
NO_2	X				
Pb	X				

[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	0	0	0	0	0
NOx	0	0	0	0	0
VOC	0	0	0	0	0
PM10	0	0	0	0	0

Source Document: ENVIRONMENTAL ASSESSMENT AIRCRAFT CONVERSION AND RELATED ACTIONS GOWEN FIELD, ID OF 9/17/91 (SECTION 4.4.1). STATES NEGLIGIBLE EFFECT §4.3.1

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	0	0	0	0	0
NOx	0	0	0	0	0
VOC	0	0	0	0	0
PM10	0	0	0	0	0

Source Document: ENVIRONMENTAL ASSESSMENT AIRCRAFT AND RELATED ACTIONS GOWEN FIELD, ID OF 9/17/91 (SECTION 4.3.1)

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. NONE - STAFF & PLANT REMAIN UNCHANGED

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

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 BOISE, ID

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	Y	0	0	0	0	0	0
Hazardous Waste	Y	0	0	0	0	0	0
Safe Drinking Water Act	Y	0	0	0	0	0	0
PCBs	Y	0	0	0	0	0	0
Other (non-PCB) Toxic Substance Control Act	Y	0	0	0	0	0	0
Lead Based Paint	N	0	0	0	0	0	0
Radon	N	0	0	0	0	0	0
Clean Water Act	Y	0	0	0	0	0	0
Solid Waste	Y	0	0	0	0	0	0
Oil Pollution Act	Y	0	0	0	0	0	0
USTs	Y	0	0	0	0	0	0
Other		0	0	0	0	0	0
Total		0	0	0	0	0	0

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? NO What % of your base has been surveyed for asbestos? 0 Are additional surveys planned? 0 What is the estimated cost to remediate asbestos ($K) 0. Are asbestos survey costs based on encapsulation, removal or a combination of both? N/A

NMCRC BOISE CONSTRUCTED 1987. BUILDING CODE DOES NOT PERMIT USE OF ANY ASBESTOS PRODUCTS.

NMCRC BOISE, ID

ORIGINAL

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	0	0	0	0	0	0	0	0
PA	0	0	0	0	0	0	0	0
Other O&MN (specify)	0	0	0	0	0	0	0	0
Other (specify)	0	0	0	0	0	0	0	0
TOTAL:	0	0	0	0	0	0	0	0

6d. Are there any compliance issues/requirements that have impacted operations and/or development plans at your base. NO

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
NONE						

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

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

NMCRC Boise, ID

ORIGINAL

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

7d.

Is there a groundwater treatment system in place?	YES/NO
Is there a groundwater treatment system planned?	YES/NO

State scope and expected length of pump and treat operation.

7e.

Has a RCRA Facilities Assessment been performed for your base?	~~YES~~/NO

CWRF
OIET
JLB
6/4/94

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.	NO

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
NMCRC BOISE	6.84	BOISE, ID

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.)		6.84
Total Undeveloped (areas that are left in their natural state but are under specific environmental development constraints, i.e.: wetlands, endangered species, etc.)		Wetlands: 0
		All Others: 0
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		0
Total Undeveloped land considered to be without development constraints		0
Total Off-base lands held for easements/lease for specific purposes		0
Breakout of undeveloped, restricted areas. Some restricted areas may overlap:	ESQD	0
	HERF	0
	HERP	0
	HERO	0
	AICUZ	0
	Airfield Safety Criteria	0
	Other	0

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. 1.5 AC

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

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. N/A

8h.

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

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

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

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 <u>other</u> **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.

No

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

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

GARY W. GEAR
NAME (Please type or print)

Signature

COMMANDING OFFICER
Title

11 MAY 1994
Date

Division

Department

NAVAL & MARINE CORPS RESERVE CENTER, BOISE, ID
Activity

Enclosure (1)

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

GARY W. GEAR
NAME (Please type of print)

COMMANDING OFFICER
Title

NAVAL & MARINE CORPS RESERVE CENTER
Activity

BOISE, ID 83705

Signature

8/17/94
Date

Boise, ID

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

NEXT ECHELON LEVEL (if applicable)

RADM G. DENNIS VAUGHAN
NAME (Please type or print

Signature

COMMANDER
Title

21 May 1994
Date

NAVAL RESERVE READINESS
COMMAND REGION TWENTY-TWO
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 of print

Signature

Commander - Acting
Title

7 JUN 1994
Date

COMNAVSURFRESFOR
Activity

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

TF Hall
Signature

Commander, Naval Reserve Force
Title

6/8/94
Date

4400 Dauphine St.
New Orleans, LA 70146
Activity

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. DRENNAN
NAME (Please type of print

Signature

ACTING
Title

6/24/94
Date

725

ORIGINAL

DATA CALL 65
ECONOMIC AND COMMUNITY INFRASTRUCTURE DATA

Activity Name:	NAVAL & MARINE CORPS RESERVE CENTER, BOISE ID
UIC:	62139
Major Clast Claimant:	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.

DATA CALL 65
ECONOMIC AND COMMUNITY INFRASTRUCTURE DATA

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.

Average Appropriated Fund Civilian Salary Rate:	ϕ

Source of Data (1.a. Salary Rate): N/A

DATA CALL 65
ECONOMIC AND COMMUNITY INFRASTRUCTURE DATA

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ECONOMIC AND COMMUNITY INFRASTRUCTURE DATA

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			
ADA	ID	8	0	66%	8	15
CANYON	ID	4	0	34%	17	25

= 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

DATA CALL 65
ECONOMIC AND COMMUNITY INFRASTRUCTURE DATA

Source of Data (1.b. 1) & 2) Residence Data): INDIVIDUALS CONCERNED

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)
BOISE	ADA	Ø (IN CITY LIMITS)

Source of Data (1.c. Metro Areas): RAND McNALLY ROAD ATLAS

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

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	0	100 %

Source of Data (1.d.) Age Data): N/A

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.

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	0	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.)	
Associate Degree	0
Bachelor Degree	0
Masters Degree	0
Doctorate	0

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 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		
N/A			

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Industry	SIC Codes	No. of Civilians	% of Civilians
Sub-Total 3a. through 3e.	20-39	0	0
4. Transportation/Communications/Utilities	40-49	0	0
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		
4f. Communications	48		
4g. Utilities	49		
Sub-Total 4a. through 4g.	40-49		
5. Services	70-89	0	0
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		

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ECONOMIC AND COMMUNITY INFRASTRUCTURE DATA

Industry	SIC Codes	No. of Civilians	% of Civilians
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	0	0
6a. Executive and General Government, Except Finance	91		
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	0	0	100 %

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

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	0	0
2. Professional Specialty	0	0
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.)		

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Occupation	Number of Civilian Employees	Percent of Civilian Employees
2m. Communications		
2n. Visual Arts		
Sub-Total 2a. through 2n.:		
3. Technicians and Related Support	0	0
3a. Health Technologists and Technicians		
3b. Other Technologists		
Sub-Total 3a. and 3b.:		
4. Administrative Support & Clerical		
5. Services	0	0
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	0	100 %

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

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:	75%
2. Percentage of Military Spouses Who Work Outside of the Home:	88%
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:	0
3b. Employed "On-Base" - Non-Appropriated Fund:	0
3c. Employed "Off-Base" - Federal Employment:	0
3d. Employed "Off-Base" - Other Than Federal Employment 100	~~100%~~ 8

AMC
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531
1,3 ~~4694~~

Source of Data (1.h.) Spouse Employment Data): INDIVIDUAL STAFF MEMBERS

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 <u>local community</u> 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			
Schools - Private			
Public Transportation - Roadways			
Public Transportation - Buses/Subways			
Public Transportation - Rail			
Fire Protection			
Police			
Health Care Facilities			
Utilities:			
Water Supply			
Water Distribution			
Energy Supply			
Energy Distribution			
Wastewater Collection			
Wastewater Treatment			
Storm Water Collection			
Solid Waste Collection and Disposal			
Hazardous/Toxic Waste Disposal			
Recreational Activities			

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.

Source of Data (2.a. 1) & 2) - Local Community Table): Idaho Statesman Local Interviews

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			
Schools - Private			
Public Transportation - Roadways			
Public Transportation - Buses/Subways			
Public Transportation - Rail			
Fire Protection			
Police			
Health Care Facilities			
Utilities:			
Water Supply			
Water Distribution			
Energy Supply			
Energy Distribution			
Wastewater Collection			
Wastewater Treatment			
Storm Water Collection			
Solid Waste Collection and Disposal			
Hazardous/Toxic Waste Disposal			
Recreation Facilities			

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.

Source of Data (2.b. 1) & 2) - Regional Table): Idaho statesman

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ECONOMIC AND COMMUNITY INFRASTRUCTURE DATA

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: 5-6%

Units for Sale: 15%

Source of Data (3.a. Off-Base Housing):	IDAHO STATESMAN INTERVIEW OF REAL ESTATE AGENT

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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 Gov't Housing Units? *
		Elementary	Middle	High	Current	Max. Capacity	Current	Max. Ratio	
BOISE	ADA	33	7	3	25,708	26,000	21-1	24-1	NO
MERIDIAN	ADA/CANYON	16	3	3	18,050	18,500	20.5-1	25-1	NO
NAMPA	CANYON	10	2	2	8282	8500	19-1	20-1	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): NAMPA SCHOOL DISTRICT # 131
MERIDIAN SCHOOL DISTRICT
BOISE PUBLIC SCHOOLS

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 :

ALBERTSON COLLEGE OF IDAHO
BOISE BIBLE COLLEGE
BOISE STATE UNIVERSITY
COWMAN BIBLE COLLEGE
NORTHWEST NAZARENE COLLEGE

Source of Data (3.b.3) Colleges):	YELLOW PAGES - CALLED ALL LISTED SCHOOLS SCHOOL CATALOGS

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:

- AAA TRUCK DRIVER TRAINING - DIESEL TRACTOR - TRAINING
- BOISE STATE UNIV (COLLEGE OF TECH.) - 34 MAJOR CURRICULA FROM BROADCAST TECH, AUTOMOTIVE (2), NURSING, WASTEWATER TECH & WELDING
- DIESEL TRUCK DRIVER TRAINING SCHOOL - DIESEL TRACTOR TRAINING
- JOB CORPS - COED VOCATIONAL/ED TRAINING
- MITCHELL-LARSON INSURANCE SCHOOL - INSURANCE
- NEW IMAGES ACADEMY OF BEAUTY - BEAUTICIANS
- NORTHWEST LINEMAN COLLEGE - LINEMAN

Source of Data (3.b.4) Vo-tech Training):	YELLOW PAGES / CATALOGS

c. **Transportation.**

1) Is the activity served by public transportation?

	Yes	No
Bus:	X	
Rail:	X	
Subway:		X
Ferry:		X

Source of Data (3.c.1) Transportation): CO, NMCRC BASE

2) Identify the location of the nearest passenger railroad station (long distance rail service, not commuter service within a city) and the distance from the activity to the station. AMTRAK STATION - 4 MILES

Source of Data (3.c.2) Transportation): CITY MAP IN YELLOW PAGES

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. GOWEN FIELD - CO LOCATED AT AIRPORT

Source of Data (3.c.3) Transportation): CO, NMCRC BASE

4) How many carriers are available at this airport? SIX

Source of Data (3.c.4) Transportation): YELLOW PAGES

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5) What is the Interstate route number and distance, in miles, from the activity to the nearest Interstate highway? I-84 1½ MILES

Source of Data (3.c.5) Transportation):

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 problems, etc.)
2 LANE PAVED ASPHALT - LIGHTLY TRAVELED
EASILY EXPANDED WITH LARGE RIGHT OF WAY

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, NMCRC BOISE

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. IAW BASE (GOWEN FIELD) I.S.S.A., FIRE FIGHTING SERVICES PROVIDED BY BASE FIRE DEPT. AND AUGMENTED BY BOISE CITY FIRE DEPT 2 MILES AWAY

Source of Data (3.d. Fire/Hazmat): CO, NMCRC BOISE & GOWEN FIELD BASE GIG.

e. **Police Protection.**

1) What is the level of legislative jurisdiction held by the installation? U.S. AIR FORCE FACILITY ON STATE LAND. Concurrent NRD

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. GOWEN FIELD HAS ITS OWN ORGANIC SECURITY FORCE. None NRD

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): CO, NMCRC BOISE / CNRFC03

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.

NO, I.S.S.A. WITH GOWEN FIELD PROVIDES ALL UTILITIES.

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): GOWEN FIELD BASE ENGINEER

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ECONOMIC AND COMMUNITY INFRASTRUCTURE DATA

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. Albertsons	Food	2,677
2. Boise Cascade	lumber	830
3. Hewlett - Packard	computer	5700
4. Idaho Power	Power distribution	923
5. Micron	Semi conductor	4,800
6. Morrison-Knudsen	engineering	985
7. St Lukes Reg. Med Ctr	medical care	1726
8. St Alphonsus " " "	medical care	1426
9. Sears Credit Center	retail	950
10. U S West Communications	telephone	581
11. West One Bank	Banking	1839

Source of Data (4. Business Profile): Boise Chamber of Commerce

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ECONOMIC AND COMMUNITY INFRASTRUCTURE DATA

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: NONE

b. Introduction of New Businesses/Technologies:

MAJOR SEMICONDUCTOR PRODUCTION
REGIONAL BANKING
CONSTRUCTION PRODUCTS

c. Natural Disasters:

NONE

d. Overall Economic Trends:

POSITIVE, AREA IS GROWING RAPIDLY AND EXCEEDS NATIONAL AVERAGE

Source of Data (5. Other Socio/Econ): Co, NMCRC Boise

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

CAMPAIGN DRUG FREE - seminars to 1,200 students annually
30 military funerals for active, reserve, retired Navy.

Source of Data (6. Other): CN, NMCRC Boise

BRAC-95 CERTIFICATION

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

G. W. GEAR
NAME (Please type or print)

Signature

COMMANDING OFFICER
Title

6/28/94
Date

N/A
Division

N/A
Department

NAVMAR CORESCEN BOISE, ID
Activity

4607

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

NEXT ECHELON LEVEL (if applicable)

CAPT. S.M. BROOKER NAME (Please type or print)	SMBrooker Signature
Commander Acting Title	8 JULY 1994 Date
NAVAL RESERVE READINESS COMMAND REGION TWENTY-TWO 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
	Date 13 JUL 1994
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)	TF Hall Signature
Commander, Naval Reserve Force Title	7/25/94 Date
4400 Dauphine St. New Orleans, LA 70146 Activity	

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

4607 COPIES

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

G. W. GEAR
NAME (Please type or print)

Signature

COMMANDING OFFICER
Title

6/29/94
Date

NAVMARCORESCEN BOISE, ID
Activity

725

CAPACITY ANALYSIS:
DATA CALL WORK SHEET FOR
RESERVE CENTER: NAVAL & MARINE CORPS RESERVE CENTER, BOISE, ID
ACTIVITY UIC: 62139

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

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

ORIGINAL

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1INTRODUCTION

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.

6E139

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	300	300	312	312	312	312	312
Assembly Hall	144	144	145	145	145	145	145
Conference/Classroom	72	72	72	72	72	72	72
Multi-Media Center	0	0	0	0	0	0	0
Team Training	0	0	0	0	0	0	0
Armory	144	144	144	144	144	144	144
Other (designate)							

Duplicate all charts as necessary.

62139

2. Throughput. For each type of drill space utilization n 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	120	120	140	140	145	145	145
Assembly Hall	160	169	170	165	165	165	165
Conference/Classroom	40	40	40	50	50	50	50
Multi-Media Center	0	0	0	0	0	0	0
Team Training	0	0	0	0	0	0	0
Shops	20	20	5	0	0	0	0
Armory	10	10	10	15	15	15	15
Other (designate)							

62139

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
NUMBER OF SELRES	ACTUAL MANNING LEVEL	225 ~~169~~	221 ~~169~~	166 ~~169~~	175 ~~169~~	175 ~~169~~	175 ~~169~~	175 ~~169~~
	AUTHORIZED BILLETS	169 ~~127~~	173 ~~127~~	119 ~~127~~	119 ~~127~~	119 ~~127~~	119 ~~127~~	119 ~~127~~
NUMBER OF TARs	ACTUAL MANNING LEVEL	~~9~~ 7	~~9~~ 7	~~9~~ 7	~~9~~ 7	~~9~~ 7	~~9~~ 7	~~9~~ 7
	AUTHORIZED BILLETS	~~9~~ 7	~~9~~ 7	~~9~~ 7	~~9~~ 7	~~9~~ 6	~~9~~ 6	~~9~~ 6
USN	ACTUAL MANNING LEVEL	2	2	2	2	2	2	2
	AUTHORIZED BILLETS	2	2	2	2	2	2	2

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28 JUN 94
JDV
CNSRF-3111

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

CATEGORY		FY 1992	FY 1993	FY 1994	FY 1995	FY 1997	FY 1999	FY 2001
NUMBER OF USMCR	ACTUAL MANNING LEVEL	116	117	117	118	117	117	117
	AUTHORIZED BILLETS	109	109	109	109	109	109	109
NUMBER OF FTS	ACTUAL MANNING LEVEL	3	3	3	3	3	3	3
	AUTHORIZED BILLETS	3	3	3	3	3	3	3
USMC	ACTUAL MANNING LEVEL	10	10	10	10	10	10	10
	AUTHORIZED BILLETS	10	10	10	10	10	10	10

62139

5. Major Equipment. Identify major equipment (tanks, trucks, training craft, aircraft, etc.), if any, used in training at your Reserve Center that require special facilities for storage and maintenance (21x-xx and 4xx-xx Category Code Numbers [CCNs] as listed in the NAVFAC P-72 and described in the NAVFAC P-80, etc.) and give the types and sizes of those facilities needed. Do not include training facilities (171-xx and 179-xx CCNs). Add other types of equipment as needed. Provide facility (dill space) requirements in terms of square feet (SF) unless another measure is appropriate; indicate alternate unit of measure if used. **Duplicate this chart as needed to list all equipment..**

Type of Equipment	Number by Type	CCN:		CCN:		CCN:	
		Number of Facilities	Total SF Required	Number of Facilities	Total SF Required	Number of Facilities	Total SF Required
NONE							

62139

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		

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 & MARINE CORPS RESERVE CENTER, BOISE, IDAHO									
	FY 1993		FY 1995		FY 1997		FY 1999		FY 2001	
	BILLETS	MANNING	BILLETS	MANNING	BILLETS	MANNING	BILLETS	MANNING	BILLETS	MANNING
CG-55 LEYTE GULF 5522	46	36	28	31	28	31	28	31	28	31
CARGO HDBN 5 DET C 522	16	15	16	17	16	17	16	17	16	17
MOBASCONTGRP 2202	0	9	0	4	0	4	0	4	0	4
NMCB 18 DET 0318	2	43	1	39	1	39	1	39	1	39
NCSO SUBIC BAY 522	25	9	0	0	0	0	0	0	0	0
SIMA PEARL 922	29	34	29	24	29	24	29	24	29	24
SECGRU BOISE 322	13	13	11	10	11	10	11	10	11	10
VOLTRAUNIT 2202	0	10	0	8	0	8	0	8	0	8
FH 500 CBTZ 9 DET B	28	32	20	30	20	30	20	30	20	30
DDD PUGET DET B 422	14	20	14	12	14	12	14	12	14	12
	173	221	119	175						

G2139

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
RNMCB-18	1	39	1	39	1	39	1	39	1	39
CHB-5	16	16	16	16	16	16	16	16	16	16

Duplicate this chart as necessary to list all units.

62139

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
COMPANY "C" 4TH TANK BN	109	117	109	117	109	117	109	117	109	117

Duplicate this chart as necessary to list all units.

62139

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.

G2139

e.

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.

62139

1.

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.

G2139

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
NONE										

Duplicate this chart as necessary to list all units.

62139

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
BOISE STATE UNIVERSITY	40	40	40	40	40	40	40
ARMY NATIONAL GUARD	60	60	120	120	120	120	120

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

2-3

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28 Jun 94

62139

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.

G2134

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:	8	Y	24	6	144
Assembly Hall	1	Y	24	4	96
Conference/Classroom	2	Y	24	2	48
Multi-Media Center	0	N	0	0	0
Team Training	0	N	0	0	0
Shops	1	Y	24	8	192
Armory	1	Y	24	4	96
Other (designate)					

62139

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	6520	6520	6520	6520	6520	6520	6520	6520
CLASSROOMS	4800	4800	4800	4800	4800	4800	4800	4800
TRAINERS	0	0	0	0	0	0	0	0
LABS	375	375	375	375	375	375	375	375
SHOPS	3412	3412	3412	3412	3412	3412	3412	3412
VEHICLE MAINTENANCE BAYS	2110	2110	2110	2110	2110	2110	2110	2110
STORAGE	3271	3271	3271	3271	3271	3271	3271	3271
SUPPLY	3414	3414	3414	3414	3414	3414	3414	3414
Armory	400	400	400	400	400	400	400	400
OTHER	0	0	0	0	0	0	0	0
OTHER CCNs*	0	0	0	0	0	0	0	0
TOTAL SQ. FT.	26,137	26,137	26137	26137	26137	26137	26137	26137

* 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.

62139

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?

RESERVE CENTER ACHIEVES 100% UTILIZATION DURING DRILL PERIODS DURING NON DRILL PERIODS WE ACHIEVE 25% UTILIZATION.

06/14/1994 14:46 FROM 01 P.03

62139

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)
NONE			

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

Airspace Name	Dimensions	Scheduling Agency	Controlling Agency
NONE			

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

Airfield	Location	Ownership (Service/non-DoD)
NONE		

G2139

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?**

THREE HUNDRED

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.

NONE

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: NMCRC BOISE, ID

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.	J. B. Greene Jr.
Name	Signature
ACTING	15 JUL 1994
Title	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)

CAPT. S.M. BROOKER
NAME (Please type or print)

SMBrooker
Signature

Commander, Acting
Title

6/18/94
Date

NAVAL RESERVE READINESS
COMMAND REGION TWENTY-TWO
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

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. [illegible]
NAME (Please type or print)

TF Hall
Signature

Title [illegible]

7/5/94
Date

Activity [illegible]

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

GARY W. GREAR
NAME (Please type or print)

Signature

COMMANDING OFFICER
Title

6/20/94
Date

NAVAL & MARINE CORPS RESERVE CENTER, BOISE, ID
Activity

725

DATA CALL 63
FAMILY HOUSING DATA

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

Installation Name:	NMCRC BOISE ID
Unit Identification Code (UIC):	N62139
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

Line 4, Percentage of Military Families Living on Base, is taken from DD Form 1377.
Lines 7-9, represents the activitys' "fair share" of the complex total of the family housing budget and inventory of officer and enlisted units. This data was provided by COMNAVFACENGCOM.

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.

Enclosure (1)

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)

Signature

COMMANDER
Title

7/20/94
Date

NAVAL FACILITIES ENGINEERING COMMAND
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

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."

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

ACTIVITY COMMANDER

THOMAS A. DAMES
NAME (Please type of print)

Rear Admiral, CEC, USN
Title

LANTNAVFACENGCOM
Activity

J.B. Venable
Signature J.B. VENABLE
Acting

JUL 06 1994
Date

ENCLOSURE(2)

BRAC-95 CERTIFICATION

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

Paulette C. Brown
Name (Please type or print)

for J. R. Grindstaff
Signature

Head, Operations & Projects Branch
Title

7-6-94
Date

Housing Division
Division

Facilities Management
Department

LANTNAVFACENGCOM
Activity

BRAC-95 CERTIFICATION

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

J. Richard Grindstaff
Name (Please type or print)

J. Richard Grindstaff
Signature

Head, Requirements & Acquisition Branch
Title

7-6-95
Date

Housing Division
Division

Facilities Management
Department

LANTNAVFACENGCOM
Activity

BRAC-95 CERTIFICATION

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

Mark D. Raker
Name (Please type or print)

Mark D. Raker
Signature

Housing Management Specialist
Title

7/6/94
Date

Housing Division
Division

Facilities Management
Department

LANTNAVFACENGCOM
Activity

BRAC-95 CERTIFICATION

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

for Moses L. Meadows
Name (Please type or print)

for J. Richard Grundstaff
Signature

Director
Title

7-6-99
Date

Housing Division
Division

Facilities Management
Department

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