

Naval Facilities Engineering Command Far East
Public Works Transportation Sasebo

AIRPORT RUN REQUEST

PART A. / TO BE FILLED IN BY REQUESTING ACTIVITY

1. Requesting Activity (Name of Command)	2. Type Equipment Req'd	3. Sponsor/Escort Accompanying <input type="checkbox"/> Yes <input type="checkbox"/> No <small>* Specify name(s) , time & location for pick up of the individual(s) in the remarks block below</small>	
4. Rental Period Date: _____ Time: _____		5. Pick up Location -----> Drop off Location	
6. Passenger(s) Name (Lead of the Group) LAST, First, Middle (Rank / Grade)		7.Total Passengers	8. P.O.C. & Phone No. DSN/Comm Cell Phone
9. ACCOUNTING DATA CHARGEABLE <input type="checkbox"/> UIC / DODAAC <input type="checkbox"/> FUNDING DOCUMENT NUMBER _____			
10. SIGNATURE OF REQUESTOR		11. DATE (dd/mmm/yy)	
12. Flight Information:			
<u>AIRLINE / Flight Number</u>	<u>AIRPORT</u>	<u>TIME DEPARTURE</u>	<u>TIME ARRIVAL</u>
_____	<input type="checkbox"/> NAGASAKI <input type="checkbox"/> FUKUOKA	_____	_____
13. REMARKS (Relevant trip information) 			
PART B / TRANSPORTATION OFFICE USE ONLY			
Received Date & Time		Received By (Dispatcher)	
Email Address: M-SA-NAVFAC-FE-SASEBO-TRANSPORT-DEPT-GD@OCONUS.NAVY.MIL			
Phone / Fax : DSN 252-3326 / 3534 / 3377 Fax 252-2203			

NAVFAC-FE - SASEBO Det. 11240/19 - REV. 7 (01 NOV 19)