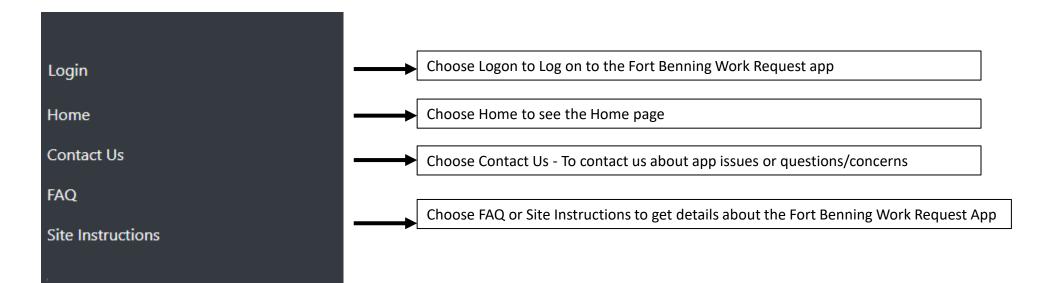
Fort Benning Work Request App Instructions



Fort Benning Work Request

🕑 Install App

Choosing this button will display a drop-down list of choices

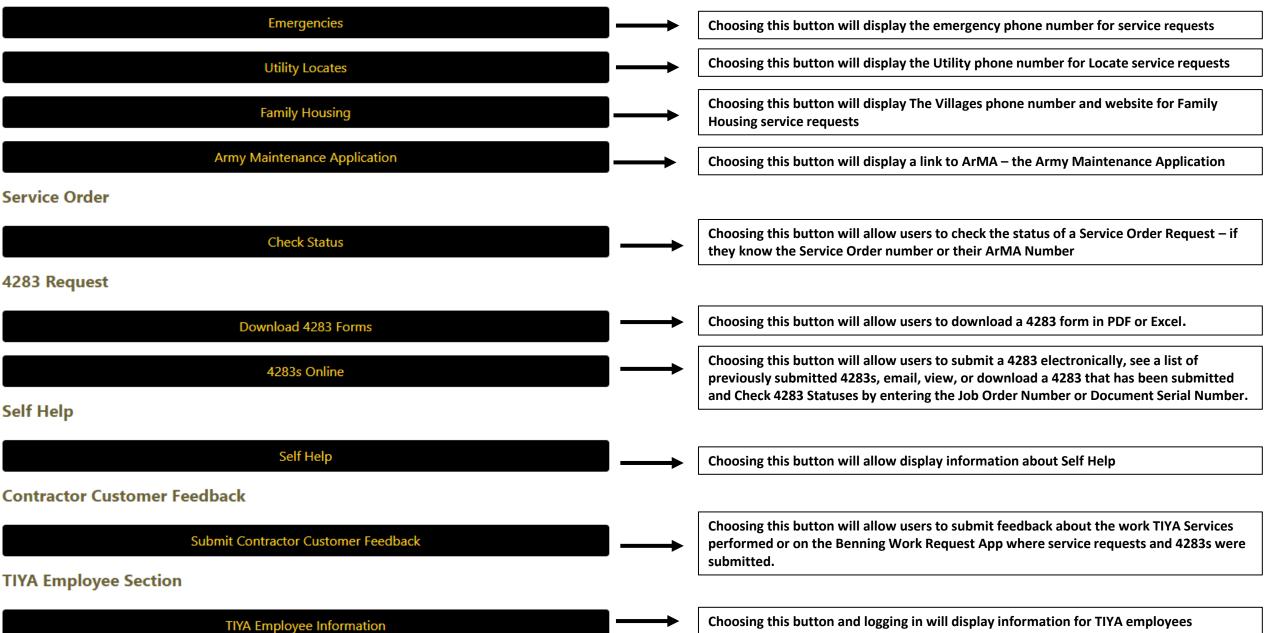


Users can fill out this form to ask us questions or give us comments

Contact Us	
Comments or Questions for Us	
Name	
Enter your name	
Your name	
Telephone Number	Extension
Enter Phone	Ext
Format: 555-555-5555	
Email Address	
Enter email	
Format: email@example.com	
ArMA Case Number	
Enter ArMA Case Number	
The ArMA Case Number that you were given for your service request	
Comments or Questions	
Enter Comments or Questions	
Comments or Questions for us	
Submit	Cancel

Service Order Request

App Home Page



rvice Order Request	
En	nergencies
Call DPW Work Control Desk at 706-545-213	5 For emergencies and issues that need immediate attention.
Uti	lity Locates
Call the Utilities Protection Center at 800-282-7411	Georgia law mandates that, before beginning any mechanized digging or excavation work, you must contact the Utilities Protection Center at least 48 hours but no more than 10 working days in advance to have utility lines marked.
Fam	nily Housing
Call The Villages at 706-685-3929	Visit their website here: www.villagesofbenning.com
Army Maint	tenance Application
Visit the Army Reporting Maintenance Application (ArMA) website here: www.armymaintenance.com	The Army Reporting Maintenance Application (ArMA) will allow Soldiers and their Families to report maintenance requests on a computer or smart phone through a publicly available website. New users can sign up on the ArMA site.
	Self Help
Bldg 69 6811 Wold Ave Fort Benning GA 31905	Hours of Operation: Monday - Friday
Bobby McGill	0800 - 1630 (except for Federal Holidays)

Service Order

Check Status

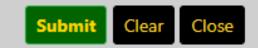
Users can check the status of any Service Order – by entering the ArMA Case Number or the Service Order Number

Service Order Status

Please enter your ArMA Case Number to check the status of your Service Order. If your inquiry does not return a status, please check with the Work Control Desk at 706-545-2135 for your current status.

ArMA Case Number

Enter ArMA Case Number...



4283 Request

Download 4283 Forms

Users can download a fillable pdf version of a 4283 or an Excel version as well as instructions and an example

Download 4283 Forms

Downloadable forms and information below:

- Download Excel Version
- Download PDF Version
- Download Manual 4283 Form Instructions
- Download Example Completed 4283

Note: Return completed form along with any required attachments to the PWO Admin Department in Building 470.

If you have any questions, please contact the PWO Admin Department at 706-545-6010



			Fo			ENGINEERI ee DA Pam 420-1			I.				
This project	complies wit	th Title 10, U	SC Section	n 2461	, for mainten	ance, repair and	construction co	ntracts for real	property using (Operation and Ma	aintenance fu	nds.	
PART A (See requestor	CUSTOMER	SERIA	L	түре			SHORT J	OB DESCRIPTIC	N			DATE	
instructions)		NUMBE	-R								DA	MON	YR
INSTALLATION							BUILDING/FACI	LITY NUMBERS					
ABBREVIATION OF FACILITIES		1	2		3	4	5	6	7	8	9	1	0
1													
2													
3 REMARKS													
REMARKO													
INSTALLATION NAME						CUSTOMER NAM	E		POC NAME		POC PHO	DNE NUM	BER
WORK DESCRIPTION (1													
AUTHORIZED REQUEST	OR (Type or	print)					AUTHORIZED RI	EQUESTOR SIG	NATURE				
	APPRO	OVAL ACTIO	N CODE:				SP	ECIAL INTERES	T CODE:			DATE	
PART B (Approving Official Only) work	REQUEST F	PRIORITY:				ES	TIMATED WORK	K START DATE:		DA	MON	YR
	PROGR	RAM INDICA	TOR CODE	E:				TIMATED WORK	K COMPLETION				
ENVIRONMENT/ YES NO		TAL	WORK TO		ERFORMED	WORKC		APPROVA FUNDED	AL AMOUNTS UNFUND		SOURCE O	FFUNDS	
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	ITIATED			CO	NTRACT		\$ \$		\$\$	ACCOUN	IT PROCESS	NG CODE	Ē
	S / EIA OMPLETED			TRO	DOP	тот	_ •		\$				
DESIGN APPROVAL (PI	ease type or p	rint name)		DATE	AF	PROVAL AUTHO	RITY (Please ty)	pe or print name)	APPR	OVAL ACTION		DATE	
DESIGN APPROVAL SIG	NATURE		DA	MON	AF	PROVAL AUTHO	RITY SIGNATUR	RE		APPROVED	DA	MON	YR
When										DISAPPROVED			
DA FORM 4283 NOV	/ 2049				DDE	VIOUS EDITIONS	ADE OBSOLETE					APD	LC V1.00ES

DA FORM 4283, NOV 2018

COMPLETION INSTRUCTION FOR DA Form 4283 - FACILITIES ENGINEERING WORK REQUEST

(Part "A" completed by requestor per instructions below) (Part "B" completed by the DPW in accordance with local procedures)

PART "A"

CUSTOMER ID: One to three alpha numeric characters per local DPW policy.

A code used to identify the user, occupant, owner of a facility, or the organizational activity submitting a work request.

DOCUMENT SERIAL NO: <u>Must</u> be five alpha numeric characters. Based on local procedures, this number may be generated and entered by the requestor or computer generated and assigned by DPW. It is a number which indicates a place in a series and when used in conjunction with installation number, customer identification, document type, and fiscal year, it uniquely identifies one document of a particular type.

FISCAL YEAR: The last digit of the fiscal year; i.e., '3' for Fiscal Year 2003.

TYPE: Leave blank; DPW Work Reception will complete

SHORT JOB DESCRIPTION: Up to 30 alpha numeric characters that provide a description with a concise summary statement of the work to be performed.

DATE: The date Work Request was completed (Format - 15 JUL 03).

INSTALLATION ABBREVIATION: Up to eight alpha numeric characters for the locally assigned abbreviation of the installation's officially designated name; e.g., Fort Benjamin Harrison abbreviated as Fort Ben.

FACILITY NUMBER: A code of five alpha numeric characters which represent the unique serial number assigned to a real property facility within an installation for identification through its life cycle, e.g. P0001.

REMARKS: At a minimum, include email address of the Primary POC and an Alternate POC for requested work.

INSTALLATION NAME: The official name of an Army real estate holding and the principal function as defined in the real property inventory, e.g., Fort Lee.

CUSTOMER NAME: The name or description of the user, occupant, owner of a facility, or the organizational activity authorized to submit a request for work consisting of up to 15 alpha numeric characters.

POC NAME: Name of the person responsible for specific work information about requested work consisting of up to 15 alpha numeric characters (Format - Last Name, First Name)

POC PHONE NUMBER: Phone number for POC of this particular work request consisting of up to 12 alpha numeric characters.

WORK DESCRIPTION: Description of work to include impact and justification.

AUTHORIZED REQUESTOR: The name of the individual who is authorized to request work.

SIGNATURE: Signature of Authorized Requestor.

Service Order Request

	Emergencies
	Utility Locates
	Family Housing
A	rmy Maintenance Application
Service Order	
	Check Status
4283 Request	
	Download 4283 Forms
	4283s Online

Contractor Customer Feedback

Submit Contractor Customer Feedback

Submitting 4283 Online requires a Logon – please contact the PWO Admin Department at <u>706-545-6010</u> to request a logon

4283 Request

Submit 4283 Request

Users must have a valid Logon and password to submit 4283s online

To receive a Logon and Password contact PWO Admin Department at: 706-545-6010

Log in

Use your account credentials to log in.

Email

The Email field is required.

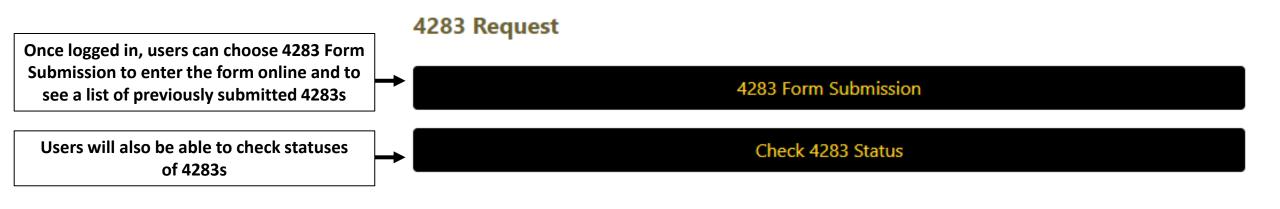
Password

The Password field is required.

□ Remember me?



Forgot your password?





4283 Form Submission

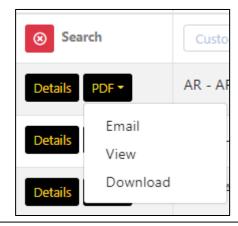
Users can choose Create and Submit 4283 Form to enter the 4283

Users will see a list of their previous 4283 submissions with searchable and sortable fields

If the user is a non-admin user, they can select the <u>Include all submissions from my customer</u> <u>list</u> checkbox to see all 4283s submitted

The details button will show the details for that particular 4283.

The Search button will clear the filters.



The PDF button will allow users to Email, View, or Download a printable 4283.



Fort Moore Work Request

4283 Online Form Submission



Previous Submissions

Include all s	Include all submissions from my Customer List								
Show 150 🗢 entries								Excel	
Action	Customer 1	Document Serial No	FY ît	Type î↓	Short Job Description $\ensuremath{\ensuremath{\mathbb{I}}}\ensuremath{\mathbb{I}}$	Request Date	POC Name	Requested By	
Clear Search 🛞	Customer X	Docume X	FY X	Type X	Short Job Description X	Request Date X	POC Name X	Requested By	
Details PDF -	A1 - US ARMOR SCHOOL	12130	23	J	WQWEQDWEQD	08/08/2023	QCp	QCUser@aptim.com	
Details PDF -	A1 - US ARMOR SCHOOL	12129	23	J	HELP ME!	08/08/2023	QCp	QCUser@aptim.com	
Details PDF -	A3 - 316 CAV BDE	23423	21	J	This is a short job desc1	02/23/2021	QCp	QCUser@aptim.com	
Details PDF -	A2 - 194TH ARMOR BDE	14223	21	J	Short Job Desc A	02/17/2021	QCp	QCUser@aptim.com	
Details PDF -	A3 - 316 CAV BDE	14223	21	J	Short Job Desc A	02/17/2021	QCp	QCUser@aptim.com	
Details PDF -	A25 - 2/15 CAV REGT	12346	21	J	This is a short job desc2	02/17/2021	QCp	QCUser@aptim.com	
Details PDF -	A25 - 2/15 CAV REGT	12345	21	J	This is a short job desc1	02/17/2021	QCp	QCUser@aptim.com	

The Excel button will download the list into Excel

4283 Request Details

4285 Request Details		
Customer	UC - UNITED CITIES	
Document Serial No	00000	
FY	21	
Туре	J	
Short Job Description	TESTING	
Request Date	03/17/2021	
Installation	01022 FORT BENNING AL	
Building or Facility Numbers	00004 RECREATION CTR UCHEE CREEK - COMFORT STN 3	
Remarks	TESTING REMARKS	
POC Name	Lisa Johnson	
POC Phone Number	865-300-6622	
Extension	911	
POC Email Address	lisa.johnson@aptim.com	
Alt POC Name		
Alt POC Phone Number		
Alt POC Extension		
Alt POC Email Address		
Work Description	TESTING WORK DESC	
Close		
Attachments		Download Selected
Photos		Select All Photos

Details



The PDF button will allow users to Email, View, or Download a printable 4283.

Printed 4283 pdf will look like this example. Last name and First name of the logged in user and the submittal date and time will serve as the Authorized Requester Signature.

						RING WORK F 0-11; the propone		ACSIM.					
This project complies wit	th Title 10, USC	Section 2461, for i	mainte	enanc	e, repair an	d construction co	ontracts for re	al proper	rty usin	g Operation	and Mainter	ance fur	ıds.
PART A ID (See requestor instructions)		DOCUMENT SERIAL NUMBER	FY	түре		SH	ORT JOB DES	SCRIPTIO	N		D	DATE A MON	
	A1	00000	21	J			TESTIN	G			1	4	21
INSTALLATION ABBREVIATION						BUILDING/FAC	ILITY NUMBE	RS					
OF FACILITIES	1	2	3		4	5	6	7		8	9	1	0
13025	00012												
REMARKS Alternate	POC:												
TESTING													
INSTALLATION NAME		CUSTO	MER	NAME		PO	C NAME			POC PH	IONE NUMB	ER	
01022 FORT MOORE AL		US ARMOR SCHO	OL			Lisa Johnson		8	865-300	-6622 lisa.joł	hnson@apti	m.com	
WORK DESCRIPTION (Desc	ription and justifi	cation of work reque	est)										
TESTING						_							
AUTHORIZED REQUESTOR	(Type or print)					AUTHORIZED	REQUESTOR	R SIGNAT	TURE				
Johnson, Lisa						Johnso	n, Lisa 04/0	1/2021	09:37.	:39			
	APPROVAL AC	TION CODE:					SPECIAL IN	TEDEOT	0005			DATE	
PART B	WORK REQUE	ST PRIORITY:					SPECIAL IN	TEREST	CODE:		D	A MON	YR
(Approving Official Only)	PROGRAM IND					EST	IMATED WOR	K START	DATE				
	PROGRAMINE	ICATOR:				ESTIMATED	WORK COM	PLETION	DATE:				
ENVIRONMENTAL IM	IPACT	WORK TO BE PE	RFOR	RMED	WORKC	LASS A	PPROVAL A	MOUNTS		SOL	URCE OF FU	INDS	
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DESIGN APPROVAL (Please	type or print nai	me) DATE		APP	ROVAL AU	HORITY (Please	type or print n	ame)	APPRO	OVAL ACTION	N	DATE	
DESIGN APPROVAL SIGNA	TURE	DA MON	YR	АРР	ROVAL AU	HORITY SIGNAT	ſUE			APPROVED		A MON	YR
DA FORM 4283, NOV 2018				PRE	VIOUS EDI	IONS ARE OBS	OLETE.				APD LC	V1.00ES	⊥ }

Create and Submit 4283 Form

Customer: One to three alpha numeric characters

Document Serial No: Autogenerated by system

FY: Last two digits of the Fiscal Year

Type: One-digit request type

Short Job Description: Provide a short but SPECIFIC job description. Maximum length is 30 characters.

Request Date: Defaults to today's date - Format: MM/DD/YYYY

Facility Fields Information

Users input their installation and the building or facility number – the list of facilities will be narrowed down as users type in the facility number or facility description – more than one facility can be entered

Remarks Fields Information

Additional information about the work requested

Point of Contact Field Information

Name, Phone Number, and Email Address

Alternate Point of Contact information – Name, Phone Number, and Email Address

Create 4283 Request

This project complies with Title 10, and Maintenance funds.	USC Section	2461, for m	aintena	ince, repair ar	nd construction contracts for real pro	perty using Operation
Customer	Document AUTOGEN		FY 23	Type J	Short Job Description ENTER SHORT JOB DESCRIPTION	Request Date 8/15/2023
Field Help + Work Locations - Installations and	Buildings/Fa	acilities				
Installation		Building or	Facility	Numbers		
Select Installation	~	Search Bui	ldings o	or Facilities		
The installation where the work requested is to performed – must be selected before selecting to or Facility Number		Provide the Bu work requested	_	ility numbers of Re	eal Property facilities within the selected installatio	n that will be affected by the
Remarks						
Enter Remarks						
Remarks, notes, and comments about the request						
Point of Contact						
POC Name	POC Phone	Number	E	xtension	POC Email Address	
POC Lisa Johnson	865-300-	6622		Extension	Enter POC email	
Provide a good POC name of someone who will be able to answer any questions about the work request	Phone number	r of POC			Format: email@example.co	m
Alternate Point of Contact +						

Work Description

Description of work to include impact and justification as well as requested completion date

Work Description

Enter Work Description...

Specific description of work to include impact and justification. Include a thorough description of the work required and a complete description of the location (i.e. back wall of the kitchen on the left near the kitchen sink). The more specific you are the better maintenance understands what you want and where you want it. For justification, please explain why the work is required. How does not having it affect your mission? If you reference security or safety – please attach a security or safety inspection. A good justification will determine whether the work request is processed or returned to the submitter.

Add Documents and Photos

Clear Cancel

Confirmation

Uploads

Users can upload any images, pictures, pdfs, excel spreadsheets, or any document needed for this work

Confirmation

By checking this box you are confirming that the contents of this form are correct

Document and Photo Attachments

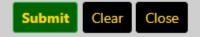
Click a document or photo in the list to remove from upload

Job Order Status

Users enter the Job Number or the Document Serial Number to check Job status Please enter your Job Order Number or Document Serial Number to check the status of your requested Work Order. If your inquiry does not return a status, please check with the Work Control Desk at 706-545-6010 for your current status.

Job Order or Document Serial Number

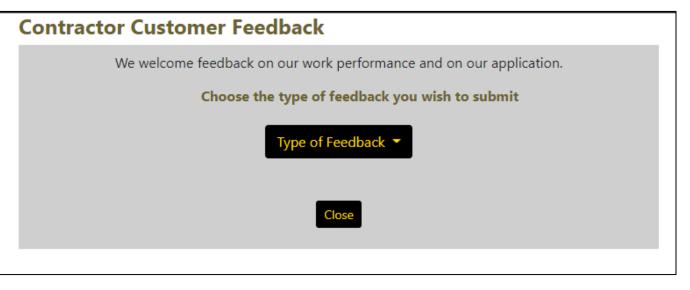
Enter Job Order or Document Serial Number...



Contractor Customer Feedback

Submit Contractor Customer Feedback

Customer feedback is welcome and encouraged. It will help us serve you better!



Type of Feedback 💌

Feedback on work performed

Feedback on this application

Users can provide customer feedback on the work that TIYA services performed

Users can provide customer feedback on the Fort Benning Work Request Application

Contractor Customer Feedback

Contractor Customer Feedback on work performed

ease complete this form to provide feedback to TIYA MANAGEMENT. This is a separate reporting tool from the teractive Customer Evaluation (ICE) provided by Fort Benning.	
ork Order Number	
Enter Work Order Number	
ality Control Work Order Number (Maximo) if applicable	
nployee Name	
Enter Employee Name	
me of the employee providing the service (if known)	
ate of Visit	
te the service was performed	
stallation	
	~
e installation where service was performed	
inctional area in which service was performed	
Building Maintenance	
Ground Maintenance	
Range Maintenance (DPW) Remote Camps (Camp Merrill)	
Surface Area Maintenance	
Water & Sewer Systems (Camp Merrill Only)	
HVAC Maintenance Services	
Cemetery Services	

Contractor Customer Feedback performance questions on work performed

How would you rate your service?
Employee Knowledge O Excellent
O Good
O Fair
O Poor
O Unacceptable
Courtesy/Attitude
O Excellent
O Good O Fair
O Poor
O Unacceptable
 Onacceptable
Promptness of Service
O Excellent
O Good
O Fair
O Poor
O Unacceptable
Quality of Service
O Excellent
O Good
O Fair
O Poor
O Unacceptable
Overall Evaluation
O Excellent
O Good
O Fair
O Poor
O Unacceptable

Contractor Customer Feedback final comments and information

Comments & Recommendations for Improvement		
Comments		
Enter Comments		
Up to 250 characters		Í
For service rating less than Fair, you will be contacted within one week if, Response Requested checkbox and enter your name, phone number, and are optional.		
Response Requested		
Name		
Enter your name		
Required for Poor/Unacceptable service ratings		
Telephone Number	Extension	
Enter Phone	Ext	
Format: 555-555-5555 - Required for Poor/Unacceptable service ratings		
Email Address		
Enter email		
Format: email@example.com - Required for Poor/Unacceptable service rat	ings	
Your comments will allow us to better serve you. Thank you for your time	Por situations that need immediate attention, please do not hesitate to	call our
Quality Control Satisfaction line at 706-545-6231.	ack Clear Cancel	
Other Methods of Delivery		
If you don't have access to a computer and would like to send this form v	na maii, piease use the mailing address below.	
Fort Benning:		
Ken Hester		
Bldg 326, 6501 10th Division Road		
Fort Benning, Georgia 31905		
Privacy Advisory: The information you provide will be used to improve or respond to your request for information. If you do not provide any conta- reviewed whether or not you identify yourself.		

Contractor Customer Feedback on the Fort Benning Work Request Application

	and links are easily ir	terpreted			
 Excel 					
O Good	1				
○ Fair					
O Poor					
 Unac 	ceptable				
Service I	Request submittal tin	e			
O Excel	lent				
O Good	ł				
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O Unac	ceptable				
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O Excel	lent				
O Good	ł				
O Fair					
O Poor					
O Unac	ceptable				
Website	application was easy	to use			
 Excel 					
O Good					
○ Fair					
O Poor					
	ceptable				
Overall v	vebsite/application e	valuation			
O Excel					
O Good	ł				
O Fair					
O Poor					
O Unac	ceptable				
Commer	nts & Recommendation	ons for Improv	ement		
Commen	ts				
Enter C	omments				