

Request for Space Aboard NAS Pensacola

Activity: _____
Point of Contact: _____ Telephone Number: _____
E-mail Address: _____

Amount of Space Required: _____ sf Total
Administrative: _____ sf
Warehouse: _____ sf
Other: _____ sf Describe: _____
Preferred Location: _____

Reason for Request:

Need Space Beginning: _____
How Long Will Space Be Required: _____
Has Funding Source Been Identified: _____

Identify Any Special Facility Requirements:

Number of Personnel Moving into Space: _____

Identify Telephone & Communication Requirements: _____

Number of Parking Spaces Required:
Employees: _____ Visitors: _____ Vendors: _____
Note: Parking spaces will be assigned by NAS Pensacola Security Department.

Attach any additional information pertinent to space request including BFR if available.

Signature: _____ Date: _____
Activity O.I.C. / Requesting Authority