

PROJECT SUPPORT – REQUEST FORM			
DS Region		EMOS Contractor	
Project ID.		Project Type (EWP, CFI, SFW)	
Project Title			
Project Description			
Project Location/s			
Defence Project Officer Details	Name: Location: Email: Phone:		
Date of Request		Date of (First) Service required	
Project Support Services (Tick all required)			Estimated Hours
<input type="checkbox"/> EUSUP01 – Whole of Service Management			
<input type="checkbox"/> EUSUP02 – On Base Service Management			
<input type="checkbox"/> EUSUP03 – Estate Works Program Development			
<input type="checkbox"/> EUSUP04 – Site Visits			
<input type="checkbox"/> EUSUP05 – Information			
<input type="checkbox"/> EUSUP06 – Advice			
<input type="checkbox"/> EUSUP07 – Delivery			
<input type="checkbox"/> EUSUP08 – Commissioning and Acceptance			
<input type="checkbox"/> EUSUP09 - Defect Rectification			
<input type="checkbox"/> EUSUP10 – Post Occupancy Evaluation			
<input type="checkbox"/> EUSUP11 – Information and Data Management			
<input type="checkbox"/> EUSUP12 – Contract Change Proposal			
ATTACHMENTS INCLUDED: EG: PROJECT SCOPE / SCHEDULE?			
<u>Comments</u>			
EMOS to complete			
Project Support Service Officer Contact Details	Name: Location: Email: Phone:		Date Allocated