

OFFICER PERSONNEL MANAGEMENT DIVISION (OPMD) HOUSEHOLD GOODS (HHG) PCS WORKSHEET					
The amounts used in this worksheet are for budget estimate purposes only. Final payment reimbursement may differ from the estimates shown on this worksheet.					
LINE OFFICE INFORMATION - SECTION 1					
Date:		Travel Order Number: (Official Use Only)		Shipment No. (Official Use)	
Organization Address:			Commissioned Personnel Center 8403 Colesville Road, Suite 500 Silver Spring, MD 20910 Email: pcs.cpc@noaa.gov Fax: (301) 713-4140		
City:		State/Zip:			
POC Name:					
Phone:		Fax:			
OPMD POINTS OF CONTACT					
A-F Jerrard Baker - (301) 713-7728 jerrard.baker@noaa.gov		G-M Charise Stewart - (301) 713-7659 charise.stewart@noaa.gov		N-Z Tracey Peterson - (301) 713-7724 tracey.m.peterson@noaa.gov	
TRANSPORTATION/EMPLOYEE INFORMATION - SECTION 2					
Name:			New Duty Station (City/State):		
Current Home Address:			Requested Pack/Load Date		Reporting Date:
City:		State/Zip:	Estimated Weight:		Number of Rooms:
Home Phone:		Cell Phone:	Professional Books/Equip. (est. weight)		Unaccompanied Baggage (est. weight)
Current Duty Station (City/State)			Storage in Transit (days):		Number in Household:
Business Phone:			PRIVATELY OWNED VEHICLE (POV) INFORMATION		
Email Address:			Year:	Make:	Model:
ACCOUNTING INFORMATION (Official Use Only)			License:		Color:
CBS ACCS (Org/Task/Phase):			VIN:		
Comments					
ESTIMATED COSTS (to be completed by MMI) - SECTION 3					
Transportation \$ _____			days storage \$ _____		
POV Cost: \$ _____					
POC Name:			POC Phone:		
For Finance Use Only					
TRANSPORTATION INFORMATION - SECTION 4					
HHG Carrier:		SCAC:	Total Cost Estimate:		Date Assigned:
Agent:			Tender/Tariff:		
POC:		POC Phone:	USDoC/NOAA/Western Operations Branch Attn: Relocation Team 7600 Sand Point Way NE Seattle, WA 98115-6349		
Load Date:					
Required Delivery Date:					
Authorized Weight:					
Storage in Transit Authorized:					
POV Carrier:		SCAC:	POV Shipment Number:		
Comments					
APPROVED BY					
Signature		Title		Date	

Complete Sections 1 and 2 of the worksheet. Save the file using the employee's last name and first letter of the first name. Email the completed form as an attachment to: gsa.bergerms.com and pcs.cpc@noaa.gov.

Upon receipt of the completed form, Berger Management Solutions (BMS) will provide an estimate to CPC via email.