

When Filled-in, this Document becomes CUI//PRVCY.

**Upon completion of Customer Counseling Services (PWS 1.2.5.2.), the contractor shall create an electronic and/or hard copy record of the customer's application for household goods relocation services inclusive of the following information as applicable:**

Full name (Last, First, Middle Initial)

Counseled/Issue Date(s)

Total number of shipments

Last Four SSAN

DOD ID Number

Rank/Grade

Service Branch/Agency

Origin PPSO

Origin duty station

Destination duty station

Shipment Type (identify

Dependents (Y/N)

Number of Dependents

Weight Entitlement

Estimated Weight for each shipment

Origin <GELOC>

Origin/Pick-up Address

Authorized Origin Address

Secondary Origin/Pick-up Address

Destination PPSO

Destination <GELOC>

Destination Address

Authorized Destination Address

Customer ETA at Destination

Desired Survey Date

Desired Pack Begin

Requested Pickup Date

Requested Delivery Date

Pick-up Email

Pick-up Phone

Type Orders

Travel Authorization Number

Travel Authorization Date

Travel Authorization Issuing HQ

Intransit Email

Intransit Phone

NTS Release Info (if applicable)

NTS Expiration (if applicable)

Electronic Copy of Orders

Remarks field (included any notes provided by customer pertaining to shipment)

Country specific forms (customs related or any others applicable)

Customer signature/confirmation. Required for certification of their shipment responsibilities and storage responsibilities.

**When Filled-In:**

Controlled By: USTRANSCOM, TCJ9

CUI Category: PRVCY

Distribution/Dissemination Code: Limited Dissemination Control

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