

ORDER FOR SUPPLIES OR SERVICES

IMPORTANT: Mark all packages and papers with contract and/or order numbers.

1. DATE OF ORDER 01/02/2009		2. CONTRACT NO. (If any) N033C055340		6. SHIP TO: No Contacts Identified		
3. ORDER NO. MLL40G09014		4. REQUISITION/REFERENCE NO. PRCR0900121		a. NAME OF CONSIGNEE DOT/Maritime Administration, Central Region		
5. ISSUING OFFICE (Address correspondence to) Military Sealift Command, N1033/PM5 914 Charles Morris Court, S.E. Washington DC 20398-5540				b. STREET ADDRESS USNS ALTAIR		
7. TO:		c. CITY		d. STATE	e. ZIP CODE	
a. NAME OF CONTRACTOR				f. SHIP VIA		
b. COMPANY NAME MAERSK LINE, LIMITED				8. TYPE OF ORDER		
c. STREET ADDRESS ONE COMMERCIAL PL 20TH FL				<input type="checkbox"/> a. PURCHASE REFERENCE YOUR: _____ Please furnish the following on the terms and conditions specified on both sides of this order and on the attached sheet, if any, including delivery as indicated.		<input type="checkbox"/> b. DELIVERY - Except for billing instructions on the reverse, this delivery order is subject to instructions contained on this side only of this form and is issued subject to the terms and conditions of the above-numbered contract.
d. CITY NORFOLK		e. STATE VA	f. ZIP CODE 23510-2126		9. ACCOUNTING AND APPROPRIATION DATA 2009 - - X4303 - RRF - 9 - 32FS - - ALR00 - - 70 - 096132 - FS - ALR0 - 25432 - 6100 - 6600 -	
11. BUSINESS CLASSIFICATION (Check appropriate box(es)) <input type="checkbox"/> a. SMALL <input checked="" type="checkbox"/> b. OTHER THAN SMALL <input type="checkbox"/> c. DISADVANTAGED <input type="checkbox"/> g. SERVICE-DISABLED VETERAN-OWNED <input type="checkbox"/> d. WOMEN-OWNED <input type="checkbox"/> e. HUBZone <input type="checkbox"/> f. EMERGING SMALL BUSINESS				10. REQUISITIONING OFFICE DOT/Maritime Administration, Central Region		
13. PLACE OF				14. GOVERNMENT B/L NO.		12. F.O.B. POINT Destination
a. INSPECTION		b. ACCEPTANCE		15. DELIVER TO F.O.B. POINT ON OR BEFORE (Date)		16. DISCOUNT TERMS

17. SCHEDULE (See reverse for Rejections)

ITEM NO. (a)	SUPPLIES OR SERVICES (b)	QUANTITY ORDERED (c)	UNIT (d)	UNIT PRICE (e)	AMOUNT (f)	QUANTITY ACCEPTED (g)
	SEE LINE ITEM DETAIL					

SEE BILLING INSTRUCTIONS ON REVERSE	18. SHIPPING POINT		19. GROSS SHIPPING WEIGHT		20. INVOICE NO.		17(h) TOT. (Cont. pages) 17(i) GRAND TOTAL
	21. MAIL INVOICE TO: Wayne Leong						
	a. NAME DOT/ Enterprise Services Center (ESC) OFO/FAA, Oklahoma City						
	b. STREET ADDRESS (or P.O. Box) MARAD A/P Headquarters Invoices Branch AMZ-150 PO Box 25710						
c. CITY Oklahoma City			d. STATE OK	e. ZIP CODE 73125		\$50,000.00	

22. UNITED STATES OF AMERICA BY (Signature) 			23. NAME (Typed) Barbara A. Gillum TITLE: CONTRACTING/ORDERING OFFICER			
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**ORDER FOR SUPPLIES OR SERVICES
SCHEDULE - CONTINUATION**

PAGE NO.
3 of 3

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DATE OF ORDER 01/02/2009	CONTRACT NO. N033C055340	ORDER NO. MLL40G09014
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ITEM NO. (a)	SUPPLIES OR SERVICES (b)	QUANTITY ORDERED (c)	UNIT (d)	UNIT PRICE (e)	AMOUNT (f)	QUANTITY ACCEPTED (g)
0001	<p>CLIN 2004AA - Cost Reimbursable Items - ALTAIR (See Attachment J-9 individually funded via task order)</p> <p>FY09 M&R SAFETY PROGRAM MLL-ALR09-8004A Account Number: 080-004</p> <p>The purpose of this project is to accomplish MARAD approved specific work items that support RRF Safety Organization's and/or the Ship Managers' Safety Management System's objectives on the approved ships' business plan, as identified below:</p> <p>The work to be completed under this funding item includes installation of equipment or monitoring system(s) that improves the safety of the vessel and its crew. Each work item has a Configuration or Allowance Change Request attached. All completed work shall be in compliance with applicable standards as set forth in the Ship Manager contract at C.6.3, Compliance Documents, and subparagraphs thereto, at the time of acceptance.</p> <p>(Work Item List with Configuration and/or Allowance Change Requests)</p> <p>1. SR 3000623: INSTALL O2 MONITORING SYSTEM AND REMOTE ALARMS The intent of this SR is to provide labor and materials to install a percentage O2 monitoring system and alarms for the Main CO2 storage room and the Emergency Diesel Room. Contractor shall provide a professional drawing/schematic of the new system and three (3) copies to the Vessel Manager for distribution.</p> <p>2. SR 3000819: INSTALL SCBA CASCADE REFILLING SYSTEM The intent of this SR is to provide labor to install and properly secure a 4-bank, 5000 PSI Cascade air storage cylinder assembly to support refilling of SCBA bottles of 2216 PSI capacity. Also, install a stationary Boom-box Dual Containment Fill Station and hook-up the 4-bank storage cylinder assembly to the fill station.</p> <p align="center"><i>Start Date</i> <i>End Date</i> 12/26/2008 10/31/2009</p> <p>Reference Requisition: PRCR0900121</p>	1.00	NTE	50,000.000	50,000.00	

TOTAL CARRIED FORWARD TO 1ST PAGE (ITEM 17i) ➡ \$50,000.00