

New York City Department of Transportation

Staten Island Ferry

Maintenance and Repair Work Requests

September 15, 2003 to October 15, 2003

Forty-nine (49) pages total including this cover

New York City
 Department of Transportation
 Staten Island Ferry
 Maintenance & Repair Work Request

9-15-03 TO 10/15/03

Boat/Terminal: Barber's Date: 09-15-03

Repairs Required/Materials Needed: Rope falls used to
secure gangway while @ B2 are broken,
bottom set of chairs has broken,
check S I and main deck

No repairs will be made unless this report is made out properly.

Priority: B Spvr. Title: [Signature]

Person Requesting Repair/Title: Gregory Fornate

FMF Office Use Only

Work Order # 09150301 Date: 9.15-03
 Recommended Trade: _____ FMF Spvr: [Signature]
 Date Work Started: _____ Trade: PLB
 Date Work Completed: _____

Employee's Assigned to Job

Name	Title	Hours	Name	Title	Hours

Record any changes and or conditions to this request and attach any copies of storeroom requisitions to it.
 Foreman's Signature: _____

New York City
 Department of Transportation
 Staten Island Ferry
 Maintenance & Repair Work Request

Boat/Terminal: F/B A.J. BARBERI

Date: 9/14/03

Repairs Required/Materials Needed:

LOCATED ON THE MAIN DECK, NY END, BKLYN SIDE, THE MOULDING ON THE BULKHEAD IS COMING LOOSE, IT NEEDS TO BE RE FASTENED.

(THE SECTION NEAREST POWER COUNTER)

SEE MARK

No repairs will be made unless this report is made out properly.

Priority: B-

Spvr Title: Plgr

Person Requesting Repair/Title: ROBERT VUCICH

FMF Office Use Only

Work Order #: 09150302

Date: 9-15-03

Recommended Trade: _____

FMF Spvr: AM

Date Work Started: _____

Date Work Completed: _____

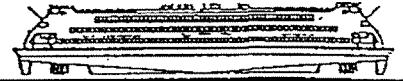
Trade: _____

Employee's Assigned to Job

Name	Title	Hours	Name	Title	Hours

Record any changes and or conditions to this request and attach any copies of storeroom requisitions to it.

Foreman's Signature: _____



Request For Repair

Requested By

MATE

Vessel (check one)

- BARBERI
- NEWHOUSE
- AUSTEN
- NOBLE
- KENNEDY
- LEGION
- LEHMAN
- COSGROVE
- OIL BARGE # _____
- DERRICK # _____
- FMF (Shop Work)
- FUEL FACILITY
- NEW VESSEL #1
- NEW VESSEL #2
- NEW VESSEL #3
- OTHER

System (check one)

- Main Propulsion
- Steering System
- Propulsion Control
- HVAC
- Generator
- Switchboard
- Compressed Air Sys
- Bilge / Ballast Sys
- Potable Water Sys
- S/W Service Sys
- Sanitary Sys
- Lighting / Wire Sys
- Structure / Hull
- Navigation Sys
- Rescue Equip
- Fire Fighting Sys
- Fuel / Lube Sys
- Gear / Tackle
- Miscellaneous

Equipment I.D. #

N/A

Equipment # / Name

INFLATABLE

Location (check all applicable)

- Fwd (NYE)
- Aft (SIE)
- Amidships
- Vessel
- Port (Jersey Side)
- Stbd (Brooklyn Side)
- Pilot House
- Control Room
- Bridge Deck
- Hurricane Deck
- Saloon Deck
- Main Deck
- Embark Deck (AJB Cts)
- Engine Room
- Voith Compt
- Steering Compt
- Stem Tube Compt
- Water Tank Compt
- Fuel Tank Compt
- Motor Room
- Fan Room
- Generator Room
- Boiler Room
- Shaft Alley Compt
- Mens Room
- Handicap Room
- Ladies Room
- Emergency DG Compt
- Locker Room
- CO2 Compt
- MSD Room
- Stack
- Forepeak/Void
- Miscellaneous

Remarks (State briefly repairs to be made or most prominent symptom) :

REPLACE 1 INFLATABLE THAT
WILL EXPIRE IN 12 DAYS

Supervisor / Title

[Signature]

Date

9/17/03

This section for FMF office use only

WORK ORDER #: 09180301

TRADE:

RIB

Type:

Priority:

B

FMF SUPERVISOR:

[Signature]

DATE:

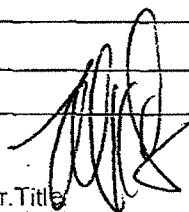
9/18/03

**New York City
Department of Transportation
Staten Island Ferry
Maintenance & Repair Work Request**

Boat/Terminal: Barber Date: 09-18-03

Repairs Required/Materials Needed:
the edge moulding on the door main
deck SW end of Bay side
replace or remove

No repairs will be made unless this report is made out properly.

Priority: B Spvr. Title: 
 Person Requesting Repair/Title: Greg Van Gmate

FMF Office Use Only

Work Order #: 09180302 Date: 9/18/03
 Recommended Trade: T/S FMF Spvr: SP
 Date Work Started: _____ Trade: T/S
 Date Work Completed: _____

Employee's Assigned to Job

Name	Title	Hours	Name	Title	Hours

Record any changes and or conditions to this request and attach any copies of storeroom requisitions to it.
 Foreman's Signature: _____

**New York City
Department of Transportation
Staten Island Ferry
Maintenance & Repair Work Request**

Boat/Terminal: BARBERI Date: 9/18/03

Repairs Required/Materials Needed: LIFE BOAT #4 LIGHTING:

- ① SPOT LIGHT IN OP
 - ② ONE DECK LIGHT HANGING BY ITS WIRE
 - ③ ONE DECK LIGHT WITH BAD SOCKET
- NO LIGHTS IN THIS SPACE
VERY DARK

No repairs will be made unless this report is made out properly.

Priority: B Spvr. Title: [Signature]

Person Requesting Repair/Title: [Signature]

Work Order #	① 09180303	FMF Office Use Only			
Recommended Trade:	<u>ELECT.</u>	② 09180304			
Date Work Started:		③ 09180305	Date: <u>9/18/03</u>		
Date Work Completed:			FMF Spvr: <u>[Signature]</u>		
			Trade: <u>NEC</u>		
Employee's Assigned to Job					
Name	Title	Hours	Name	Title	Hours
Record any changes and or conditions to this request and attach any copies of storeroom requisitions to it.					
Foreman's Signature: _____					

New York City
 Department of Transportation
 Staten Island Ferry
 Maintenance & Repair Work Request

Boat/Terminal: BARBERI

Date: 9/17/03

Repairs Required/Materials Needed:

REPAIR BROKEN WHEEL ON GATE SALOON DECK
SIE BKLYN SIDE

No repairs will be made unless this report is made out properly.

Priority: B

Spvr. Title: WATE

Person Requesting Repair/Title WATE

FMF Office Use Only

Work Order # 09180306

Recommended Trade: BLM

Date: 9/18/03

Date Work Started: _____

FMF Spvr: [Signature]

Date Work Completed: _____

Trade: BLM

Employee's Assigned to Job

Name	Title	Hours	Name	Title	Hours

Record any changes and or conditions to this request and attach any copies of storeroom requisitions to it.

Foreman's Signature: _____

New York City
 Department of Transportation
 Staten Island Ferry
 Maintenance & Repair Work Request

Boat/Terminal: BARBER 1 Date: 9/17/03

Repairs Required/Materials Needed:
REPLACE BROKEN PLEXIGLASS IN FIRE EXTINGUISHER
STA 3-4 SALOON DK NJ SIDE AMIDSHIP

No repairs will be made unless this report is made out properly.

Priority: A Spvr. Title: MATE

Person Requesting Repair/Title MATE

Work Order #		FMF Office Use Only	
Work Order #	<u>09180307</u>	Date:	<u>9/18/03</u>
Recommended Trade:	<u>CARP</u>	FMF Spvr:	<u>[Signature]</u>
Date Work Started:	_____	Trade:	<u>CARP</u>
Date Work Completed:	_____		

Employee's Assigned to Job					
Name	Title	Hours	Name	Title	Hours

Record any changes and or conditions to this request and attach any copies of storeroom requisitions to it.
 Foreman's Signature: _____

**New York City
Department of Transportation
Staten Island Ferry
Maintenance & Repair Work Request**

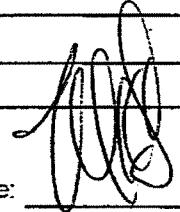
Boat/Terminal: BARBER 1

Date: 9/18/03

Repairs Required/Materials Needed: #2 LIFE BOAT LIGHTING:

SPOT LIGHT OUT

No repairs will be made unless this report is made out properly.



Priority: A

Spvr. Title: _____

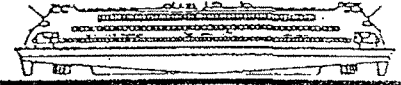
Person Requesting Repair/Title Puente

FMF Office Use Only			
Work Order #	<u>09180308</u>	Date:	<u>9/18/03</u>
Recommended Trade:	<u>Elect</u>	FMF Spvr.:	<u>[Signature]</u>
Date Work Started:	_____	Trade:	<u>Elect</u>
Date Work Completed:	_____		

Employee's Assigned to Job					
Name	Title	Hours	Name	Title	Hours

Record any changes and or conditions to this request and attach any copies of storeroom requisitions to it.

Foreman's Signature: _____



Request For Repair

Requested By JAMES FINLEY

Vessel (check one)

- BARBERI
- NEWHOUSE
- AUSTEN
- NOBLE
- KENNEDY
- LEGION
- LEHMAN
- COSGROVE
- OIL BARGE # _____
- DERRICK # _____
- FMF (Shop Work)
- FUEL FACILITY
- NEW VESSEL #1
- NEW VESSEL #2
- NEW VESSEL #3
- OTHER

System (check one)

- Main Propulsion
- Steering System
- Propulsion Control
- HVAC
- Generator
- Switchboard
- Compressed Air Sys
- Bilge / Ballast Sys
- Potable Water Sys
- SW Service Sys
- Sanitary Sys
- Lighting / Wire Sys
- Structure / Hull
- Navigation Sys
- Rescue Equip
- Fire Fighting Sys
- Fuel / Lube Sys
- Gear / Tackle
- Miscellaneous

Equipment I.D. # N/A

Equipment # / Name DOORS

Location (check all applicable)

- Fwd (NYE)
- Aft (SIE)
- Amidships
- Vessel
- Port (Jersey Side)
- Stbd (Brooklyn Side)
- Pilot House
- Control Room
- Bridge Deck
- Hurricane Deck
- Saloon Deck
- Main Deck
- Embark Deck (AJB CIs)
- Engine Room
- Voith Compt
- Steering Compt
- Stem Tube Compt
- Water Tank Compt
- Fuel Tank Compt
- Motor Room
- Fan Room
- Generator Room
- Boiler Room
- Shaft Alley Compt
- Mens Room
- Handicap Room
- Ladies Room
- Emergency DG Compt
- Locker Room
- CO₂ Compt
- MSD Room
- Stack
- Forepeak/Void
- Miscellaneous

Remarks (State briefly repairs to be made or most prominent symptom) : DOOR CHECK BRACKET BROKEN

SECOND DOOR FROM BROOKLYN SIDE

Supervisor / Title JAMES FINLEY. ASST CAPT.

Date 09/19/03

This section for FMF office use only

WORK ORDER #: 09190302

TRADE: CARPS

Type: _____

Priority: B

FMF SUPERVISOR: [Signature]

DATE: 9-19-03

New York City
 Department of Transportation
 Staten Island Ferry
 Maintenance & Repair Work Request

Boat/Terminal: Barberi Date: 9-22-03

Repairs Required/Materials Needed:

main deck N5 side scissor gate SI end
missing from end post
wheel is

No repairs will be made unless this report is made out properly.

Priority: B

Spvr. Title: [Signature]

Person Requesting Repair/Title: [Signature]

FMF Office Use Only

Work Order # 09290301

Recommended Trade: _____

Date: 9-22-03

Date Work Started: _____

FMF Spvr: [Signature]

Date Work Completed: _____

Trade: B/M

Employee's Assigned to Job

Name	Title	Hours	Name	Title	Hours

Record any changes and or conditions to this request and attach any copies of storeroom requisitions to it.

Foreman's Signature: _____

**NYC Department of Transportation
Staten Island Ferry
Operational Risk Management / Safety Office**

Maintenance and Repair Request

LINOLEUM ON THE DECKS OF THE PILOT HOUSE ENTRANCES BECOMES VERY SLIPPERY WHEN WET.

PLEASE INSTALL CARBORUNDUM STRIPS INSIDE PILOT HOUSE DOORS AND ON ALL LANDINGS TO PREVENT SLIP AND FALL ACCIDENTS DURING INCLEMENT WEATHER

① NY6
② SIB

~~①~~ BARBERI / NEWHOUSE

~~②~~ ③ NY6 TURN OVER
④ SIB

Generated from: Safety Audit Post Mishap Investigation

Hazard Severity: 1.Critical 2.Serious 3.Moderate 4.Minor 5.Negligible
(circle one)

Person Requesting Repair / Title: Don Westlye, SAFETY SUPERVISOR

FMF OFFICE USE ONLY

Work Order #: _____ Date: 9-24-03

Recommended Trade: PAINTER _____

Date Work Started: _____ *13* FMF Supervisor: PUTKOWSKI *Putk*

Date Work Completed: _____ Trade: PAINTER

Employees Assigned to Job

Name	Title	Hours	Name	Title	Hours

Record any changes and / or conditions to this request
And attach any copies of storeroom requisitions to it.

Foreman's Signature: _____

- ①-09290335
- ②-09290336
- ③-09290337
- ④-09290338

New York City
 Department of Transportation
 Staten Island Ferry
 Maintenance & Repair Work Request

Boat/Terminal: AJB

Date: 23 SEP 03

Repairs Required/Materials Needed:

NYE PILOT HOUSE BATHROOM DOOR NEEDS

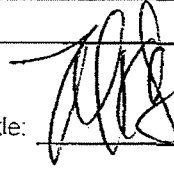
DOOR KNOB REPAIRED.

No repairs will be made unless this report is made out properly.

Priority:

13

Spvr. Title:



Person Requesting Repair/Title

R. B. W. / MATE

FMF Office Use Only

Work Order #

09290339

Recommended Trade:

Date:

9.24.03

Date Work Started:

FMF Spvr:



Date Work Completed:

Trade:

CARP

Employee's Assigned to Job

Name	Title	Hours	Name	Title	Hours

Record any changes and or conditions to this request and attach any copies of storeroom requisitions to it.

Foreman's Signature: _____

**New York City
Department of Transportation
Staten Island Ferry
Maintenance & Repair Work Request**

Boat/Terminal: Barberi

Date: 9-23-03

Repairs Required/Materials Needed:
sink on the jersey side, mens head second
came apart at the tee, it needs
permanent repair.

No repairs will be made unless this report is made out properly.

Priority: B Spvr. Title: [Signature]

Person Requesting Repair/Title: [Signature]

FMF Office Use Only

Work Order # 09290340 Date: 9-24-03
 Recommended Trade: _____ FMF Spvr: [Signature]
 Date Work Started: _____ Trade: PEB
 Date Work Completed: _____

Employee's Assigned to Job

Name	Title	Hours	Name	Title	Hours

Record any changes and or conditions to this request and attach any copies of storeroom requisitions to it.

Foreman's Signature: _____

**New York City
Department of Transportation
Staten Island Ferry
Maintenance & Repair Work Request**

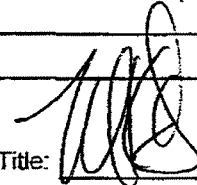
Boat/Terminal: BARREN

Date: 9-25-03

Repairs Required/Materials Needed: DE-ICING SYSTEM LEAK ON
NYE SALOON DK EMBARKATION DECK, PORT SIDE

No repairs will be made unless this report is made out properly.

Priority: B

Spvr. Title: 

Person Requesting Repair/Title Rizzo

FMF Office Use Only					
Work Order #	<u>09290354</u>			Date:	<u>9-25-03</u>
Recommended Trade:				FMF Spvr.:	<u>Am</u>
Date Work Started:				Trade:	<u>S/P</u>
Date Work Completed:					
Employee's Assigned to Job					
Name	Title	Hours	Name	Title	Hours
Record any changes and or conditions to this request and attach any copies of storeroom requisitions to it.					
Foreman's Signature: _____					

**New York City
Department of Transportation
Staten Island Ferry
Maintenance & Repair Work Request**

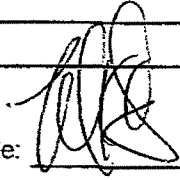
Boat/Terminal: BARBARI

Date: 9/23/63

Repairs Required/Materials Needed: OPEN FRONT & BACK COVERS
ON #2 BOILER FOR FIRESIDE CLEANING

No repairs will be made unless this report is made out properly.

Priority: B

Spvr. Title: 

Person Requesting Repair/Title Rizzo

FMF Office Use Only

Work Order # 09290355

Recommended Trade: _____

Date: 9-25-03

Date Work Started: _____

FMF Spvr: RM

Date Work Completed: _____

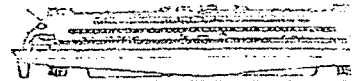
Trade: BM S. RIK

Employee's Assigned to Job

Name	Title	Hours	Name	Title	Hours

Record any changes and or conditions to this request and attach any copies of storeroom requisitions to it.

Foreman's Signature: _____



Request For Repair

Requested By

MATE

Vessel (check one)

- BARBERI
- NEWHOUSE
- AUSTEN
- NOBLE
- KENNEDY
- LEGION
- LEHMAN
- COSGROVE
- OIL BARGE # _____
- DERRICK # _____
- FMF (Shop Work)
- FUEL FACILITY
- NEW VESSEL #1
- NEW VESSEL #2
- NEW VESSEL #3
- OTHER

System (check one)

- Main Propulsion
- Steering System
- Propulsion Control
- HVAC
- Generator
- Switchboard
- Compressed Air Sys
- Bilge / Ballast Sys
- Potable Water Sys
- SW Service Sys
- Sanitary Sys
- Lighting / Wire Sys
- Structure / Hull
- Navigation Sys
- Rescue Equip
- Fire Fighting Sys
- Fuel / Lube Sys
- Gear / Tackle
- Miscellaneous

Equipment I.D. #

N/A

Equipment # / Name

[Empty box]

Location (check all applicable)

- Fwd (NYE)
- Aft (SIE)
- Amidships
- Vessel
- Port (Jersey Side)
- Stbd (Brooklyn Side)
- Pilot House
- Control Room
- Bridge Deck
- Hurricane Deck
- Saloon Deck
- Main Deck
- Embark Deck (AJB Cts)
- Engine Room
- Voith Compt
- Steering Compt
- Stem Tube Compt
- Water Tank Compt
- Fuel Tank Compt
- Motor Room
- Fan Room
- Generator Room
- Boiler Room
- Shaft Alley Compt
- Mens Room
- Handicap Room
- Ladies Room
- Emergency DG Compt
- Locker Room
- CO2 Compt
- MSD Room
- Stack
- Forepeak/Void
- Miscellaneous

Remarks (State briefly repairs to be made or most prominent symptom)

ALL URINALS SECURED DUE TO
FLOWMETERS RUNNING CONTINUOUSLY

Supervisor / Title

[Signature]

Date

9/26/03

This section for FMF office use only

WORK ORDER #:

09290356

TRADE:

PLUMB

Type:

Priority:

A

FMF SUPERVISOR:

[Signature]

DATE:

9-25-03

New York City
 Department of Transportation
 Staten Island Ferry
 Maintenance & Repair Work Request

Boat/Terminal: ATB Date: 23 SEP 03

Repairs Required/Materials Needed:
All weather deck doors need weather
stripping repaired/replaced. Currently the doors
leak excessively in inclement weather.

No repairs will be made unless this report is made out properly.

Priority: B Spvr. Title: [Signature]

Person Requesting Repair/Title: [Signature] / MATE

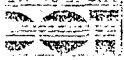
FMF Office Use Only

Work Order # 09290357 Date: 9-25-03
 Recommended Trade: _____ FMF Spvr: [Signature]
 Date Work Started: _____ Trade: CARP / TS
 Date Work Completed: _____

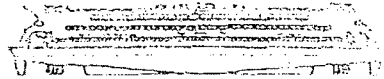
Employee's Assigned to Job

Name	Title	Hours	Name	Title	Hours

Record any changes and or conditions to this request and attach any copies of storeroom requisitions to it.
 Foreman's Signature: _____



Department of Transportation



Request For Repair

Requested By P. POTENZA

Vessel (check one)

- BARBERI
- NEWHOUSE
- AUSTEN
- NOBLE
- KENNEDY
- LEGION
- LEHMAN
- COSGROVE
- OIL BARGE # _____
- DERRICK # _____
- FMF (Shop Work)
- FUEL FACILITY
- NEW VESSEL #1
- NEW VESSEL #2
- NEW VESSEL #3
- OTHER

Systems (check one)

- Main Propulsion
- Steering System
- Propulsion Control
- HVAC
- Generator
- Switchboard
- Compressed Air Sys
- Bilge / Ballast Sys
- Potable Water Sys
- SW Service Sys
- Sanitary Sys
- Lighting / Wire Sys
- Structure / Hull
- Navigation Sys
- Rescue Equip
- Fire Fighting Sys
- Fuel / Lube Sys
- Gear / Tackle
- Miscellaneous

Equipment I.D. # N/A

Equipment # / Name OWS

Location (check all applicable)

- Fwd (NYE)
- Aft (SIE)
- Amidships
- Vessel
- Port (Jersey Side)
- Stbd (Brooklyn Side)
- Pilot House
- Control Room
- Bridge Deck
- Hurricane Deck
- Saloon Deck
- Main Deck
- Embark Deck (AJB Cls)
- Engine Room
- Voith Compt
- Steering Compt
- Stern Tube Compt
- Water Tank Compt
- Fuel Tank Compt
- Motor Room
- Fan Room
- Generator Room
- Boiler Room
- Shaft Alley Compt
- Mens Room
- Handicap Room
- Ladies Room
- Emergency DG Compt
- Locker Room
- CO₂ Compt
- MSD Room
- Stack
- Forepeak/Void
- Miscellaneous

Remarks (State briefly repairs to be made or most prominent symptom)

3/4 inch SPRING check FOR O.W.S.
Please Replace OR supply TO CREW.

Supervisor / Title

Date 9/26/03

This section for FMF office use only

WORK ORDER #: 09290369 TRADE: S/P Type: _____ Priority: B

FMF SUPERVISOR: DATE: 9-25-03

**New York City
Department of Transportation
Staten Island Ferry
Maintenance & Repair Work Request**

Boat/Terminal: BARBORI

Date: 9-26-03

Repairs Required/Materials Needed:

STEAM LEAK AT OVERHEAD
ON SALOON DK. STBD SIDE ^{FORWARD} MIDSHIP. FROM PROMENADE DK.
RADIATOR - 3RD RADIATOR FROM NYE, STBD SIDE. STEAM
AND WATER LEAKING FROM LIGHT FIXTURES (LENS PARTIALLY
REMOVED). OVERHEAD PANELS NEED TO BE REMOVED TO
REPAIR LEAK - CANNOT SEE EXACT LOCATION. ALSO NOT LEAKING
AT RADIATOR LINE IS PLUGGED FORWARD

No repairs will be made unless this report is made out properly.

Priority:

B

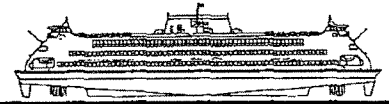
Spvr. Title:

[Signature]

Person Requesting Repair/Title

RIZZO

FMF Office Use Only					
Work Order #		<u>09290382</u>		Date: <u>9-29-03</u>	
Recommended Trade:		_____		FMF Spvr: <u>[Signature]</u>	
Date Work Started:		_____		Trade: <u>S/E</u>	
Date Work Completed:		_____		_____	
Employee's Assigned to Job					
Name	Title	Hours	Name	Title	Hours
Record any changes and or conditions to this request and attach any copies of storeroom requisitions to it.					
Foreman's Signature: _____					



Request For Repair

Requested By

POTENZA CME

Vessel (check one)

- | | | | |
|--|--------------------------------|---|-------------------------------------|
| <input checked="" type="radio"/> BARBERI | <input type="radio"/> KENNEDY | <input type="radio"/> OIL BARGE # _____ | <input type="radio"/> NEW VESSEL #1 |
| <input type="radio"/> NEWHOUSE | <input type="radio"/> LEGION | <input type="radio"/> DERRICK # _____ | <input type="radio"/> NEW VESSEL #2 |
| <input type="radio"/> AUSTEN | <input type="radio"/> LEHMAN | <input type="radio"/> FMF (Shop Work) | <input type="radio"/> NEW VESSEL #3 |
| <input type="radio"/> NOBLE | <input type="radio"/> COSGROVE | <input type="radio"/> FUEL FACILITY | <input type="radio"/> OTHER |

System (check one)

- | | | | | |
|--|---|--|---|---------------------------------------|
| <input type="radio"/> Main Propulsion | <input type="radio"/> Generator | <input type="radio"/> Potable Water Sys | <input type="radio"/> Structure / Hull | <input type="radio"/> Fuel / Lube Sys |
| <input type="radio"/> Steering System | <input type="radio"/> Switchboard | <input type="radio"/> S/W Service Sys | <input type="radio"/> Navigation Sys | <input type="radio"/> Gear / Tackle |
| <input type="radio"/> Propulsion Control | <input type="radio"/> Compressed Air Sys | <input type="radio"/> Sanitary Sys | <input type="radio"/> Rescue Equip | <input type="radio"/> Miscellaneous |
| <input type="radio"/> HVAC | <input type="radio"/> Bilge / Ballast Sys | <input checked="" type="radio"/> Lighting / Wire Sys | <input type="radio"/> Fire Fighting Sys | |

Equipment I.D. #

N/A

Equipment # / Name

CONSOLE LIGHTS

Location (check all applicable)

- | | | | | |
|--|---|--|---|---|
| <input type="radio"/> Fwd (NYE) | <input type="radio"/> Pilot House | <input checked="" type="radio"/> Engine Room | <input type="radio"/> Fan Room | <input type="radio"/> Emergency DG Compt |
| <input type="radio"/> Aft (SIE) | <input checked="" type="radio"/> Control Room | <input type="radio"/> Voith Compt | <input type="radio"/> Generator Room | <input type="radio"/> Locker Room |
| <input type="radio"/> Amidships | <input type="radio"/> Bridge Deck | <input type="radio"/> Steering Compt | <input type="radio"/> Boiler Room | <input type="radio"/> CO ₂ Compt |
| <input type="radio"/> Vessel | <input type="radio"/> Hurricane Deck | <input type="radio"/> Stern Tube Compt | <input type="radio"/> Shaft Alley Compt | <input type="radio"/> MSD Room |
| <input type="radio"/> Port (Jersey Side) | <input type="radio"/> Saloon Deck | <input type="radio"/> Water Tank Compt | <input type="radio"/> Mens Room | <input type="radio"/> Stack |
| <input type="radio"/> Stbd (Brooklyn Side) | <input type="radio"/> Main Deck | <input type="radio"/> Fuel Tank Compt | <input type="radio"/> Handicap Room | <input type="radio"/> Forepeak/Void |
| | <input type="radio"/> Embark Deck (AJB Cls) | <input type="radio"/> Motor Room | <input type="radio"/> Ladies Room | <input type="radio"/> Miscellaneous |

Remarks (State briefly repairs to be made or most prominent symptom) :

2nd CONSOLE INDICATOR LIGHTS OUT.
FUSE BEHIND ENGINE ROOM CONSOLE

Supervisor / Title

[Signature]

Date

9/30/03

This section for FMF office use only

WORK ORDER #:

09300302

TRADE:

Elect

Type:

Priority:

A

FMF SUPERVISOR:

[Signature]

DATE:

9-30-03

New York City
 Department of Transportation
 Staten Island Ferry
 Maintenance & Repair Work Request

Boat/Deck: AJB Date: 9/29/03

Repairs Required/Materials Needed:
Door check broken on main deck door,
S.I. end, 2nd door in on Jersey side.

No repairs will be made unless this report is made out properly.

Priority: B Spvr. Title: 

Person Requesting Repair/Title: R. [Signature] / MAINT

FMF Office Use Only

Work Order #: 09300303 Date: 9-30-03
 Recommended Trade: _____ FMF Spvr: [Signature]
 Date Work Started: _____ Trade: CRP
 Date Work Completed: _____

Employee's Assigned to Job

Name	Title	Hours	Name	Title	Hours

Record any changes and or conditions to this request and attach any copies of storeroom requisitions to it.
 Foreman's Signature: _____

**New York City
Department of Transportation
Staten Island Ferry
Maintenance & Repair Work Request**

Boat/Terminal: BARBER Date: 10/9/03

Repairs Required/Materials Needed:
SINK leaking in LADY'S RM.

No repairs will be made unless this report is made out properly.

Priority: B Spvr. Title: 

Person Requesting Repair/Title: D. MATE

FMF Office Use Only	
Work Order # <u>10100302</u>	Date: <u>10-10-03</u>
Recommended Trade: _____	FMF Spvr: <u>BM</u>
Date Work Started: _____	Trade: <u>ABK</u>
Date Work Completed: _____	

Employee's Assigned to Job					
Name	Title	Hours	Name	Title	Hours

Record any changes and or conditions to this request and attach any copies of storeroom requisitions to it.

Foreman's Signature: _____

New York City
 Department of Transportation
 Staten Island Ferry
 Maintenance & Repair Work Request

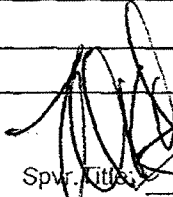
Boat/Terminal: BARBERA

Date: 10/2/03

Repairs Required/Materials Needed:
UNCLOG DRAIN IN WATER FOUNTAIN BRIDGE DR.
NJ SIDE

No repairs will be made unless this report is made out properly.

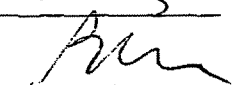
Priority: B.

Spvr. Title:  MATE

Person Requesting Repair/Title MATE

FMF Office Use Only

Work Order # 10030301
 Recommended Trade: _____
 Date Work Started: _____
 Date Work Completed: _____

Date: 10-3-03
 FMF Spvr: 
 Trade: PLBR

Employee's Assigned to Job

Name	Title	Hours	Name	Title	Hours

Record any changes and or conditions to this request and attach any copies of storeroom requisitions to it.

Foreman's Signature: _____

New York City
 Department of Transportation
 Staten Island Ferry
 Maintenance & Repair Work Request

Boat/Terminal: BARBERI Date: 10/2/03

Repairs Required/Materials Needed:
REPLACE BROKEN HALYARD & TAKE DOWN JAMMED
FLAG HURRICANE DK BKLN SIDE

No repairs will be made unless this report is made out properly.

Priority: B. Spvr. Title: RPNR. MATE

Person Requesting Repair/Title MATE

FMF Office Use Only

Work Order # 10030302 Date: 10-3-03
 Recommended Trade: _____ FMF Spvr: AM
 Date Work Started: _____ Trade: RHS
 Date Work Completed: _____

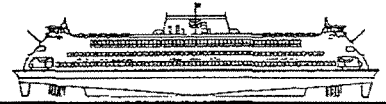
Employee's Assigned to Job

Name	Title	Hours	Name	Title	Hours

Record any changes and or conditions to this request and attach any copies of storeroom requisitions to it.
 Foreman's Signature: _____



DONE



Request For Repair

Requested By

ONE

Vessel (check one)

- BARBERI
- NEWHOUSE
- AUSTEN
- NOBLE
- KENNEDY
- LEGION
- LEHMAN
- COSGROVE
- OIL BARGE # _____
- DERRICK # _____
- FMF (Shop Work)
- FUEL FACILITY
- NEW VESSEL #1
- NEW VESSEL #2
- NEW VESSEL #3
- OTHER

System (check one)

- Main Propulsion
- Steering System
- Propulsion Control
- HVAC
- Generator
- Switchboard
- Compressed Air Sys
- Bilge / Ballast Sys
- Potable Water Sys
- S/W Service Sys
- Sanitary Sys
- Lighting / Wire Sys
- Structure / Hull
- Navigation Sys
- Rescue Equip
- Fire Fighting Sys
- Fuel / Lube Sys
- Gear / Tackle
- Miscellaneous

Equipment I.D. #

N/A

Equipment # / Name

MSD UNIT

Location (check all applicable)

- Fwd (NYE)
- Aft (SIE)
- Amidships
- Vessel
- Port (Jersey Side)
- Stbd (Brooklyn Side)
- Pilot House
- Control Room
- Bridge Deck
- Hurricane Deck
- Saloon Deck
- Main Deck
- Embark Deck (AJB Cls)
- Engine Room
- Voith Compt
- Steering Compt
- Stern Tube Compt
- Water Tank Compt
- Fuel Tank Compt
- Motor Room
- Fan Room
- Generator Room
- Boiler Room
- Shaft Alley Compt
- Mens Room
- Handicap Room
- Ladies Room
- Emergency DG Compt
- Locker Room
- CO2 Compt
- MSD Room
- Stack
- Forepeak/Void
- Miscellaneous

Remarks (State briefly repairs to be made or most prominent symptom) :

UNCLOG MACERATOR PUMP SUCTION LINE.
LINE CLOGGED W/ PAPER AND DEBRIS.

Supervisor / Title

[Signature]

Date

10/3/03

This section for FMF office use only

WORK ORDER #: 10030303

TRADE: PLUMBER

Type: _____

Priority: A

FMF SUPERVISOR: _____

[Signature]

DATE: 10-3-03

10-3-03

New York City
 Department of Transportation
 Staten Island Ferry
 Maintenance & Repair Work Request

Boat/Terminal: BARBERI

Date: 10/2/03

Repairs Required/Materials Needed:

FREE BRACKET & REPLACE MISSING PIN FOR GANGWAY
PLATFORM. TO HOLD PLATFORM SAFELY IN UP POSITION
FOR TIEING UP.

No repairs will be made unless this report is made out properly.

Priority: B

Spvr. Title: PM MATE

Person Requesting Repair/Title MATE

FMF Office Use Only

Work Order # 10030304

Date: 10-3-03

Recommended Trade: _____

Date Work Started: _____

FMF Spvr: [Signature]

Date Work Completed: _____

Trade: BM

Employee's Assigned to Job

Name	Title	Hours	Name	Title	Hours

Record any changes and or conditions to this request and attach any copies of storeroom requisitions to it.

Foreman's Signature: _____

WORK ORDERS BY DIRECTION

Monday, October 06, 2003

Page: 1

Order #	Vessel	Trade	Locale	Remarks	Status	P
10030326	BARBERI	lamper	vessel	relamp E/exit lights as needed (PCG)	inc	D
10030327	BARBERI	rigs	nye & sie main deck	verify/replace lifeboats falls (PCG)	inc	D
10030322	BARBERI	s/f	vessel	verify/weigh 15 lb CO2 fire extinguishers (PCG)	inc	D
10030323	BARBERI	s/f	vessel	verify/weigh 10 lb dry chemical extinguishers(PCG)	inc	D
10030324	BARBERI	s/f	vessel	verify ALL fire stations equipment/operation (PCG)	inc	D
10030325	BARBERI	s/f	nye & sie main deck	verify/repair standpipe valves operation (PCG)	inc	D
10030321	ST. GEORGE	carps	trmnl	verify/repair entrance/exit doors as needed (PMW)	inc	D
10030318	ST. GEORGE	pntr	trmnl	daily inspect/eliminate grafitti as needed (PMW)	inc	D
10030320	WHTRMNL	carps	trmnl	verify/repair entrance/exit doors as needed (PMW)	inc	D
10030319	WHTRMNL	pntr	trmnl	daily inspect/eliminate grafitti as needed (PMW)	inc	D

TOTAL :	10
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**New York City
Department of Transportation
Staten Island Ferry
Maintenance & Repair Work Request**

Boat/Terminal: BARBERT Date: 10-6-03

Repairs Required/Materials Needed: #2 Boiler Forward
fuel oil solenoid Burned out.
"Please Replace."

ASAP.

No repairs will be made unless this report is made out properly.

Priority: B Spvr. Title: [Signature]

Person Requesting Repair/Title: [Signature]

FMF Office Use Only	
Work Order # <u>10060304</u>	Date: <u>10-6-03</u>
Recommended Trade: _____	FMF Spvr: <u>[Signature]</u>
Date Work Started: _____	Trade: <u>[Signature]</u>
Date Work Completed: _____	

Employee's Assigned to Job					
Name	Title	Hours	Name	Title	Hours

Record any changes and or conditions to this request and attach any copies of storeroom requisitions to it.

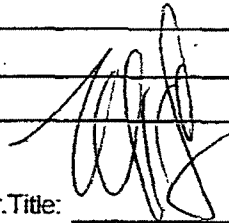
Foreman's Signature: _____

**New York City
Department of Transportation
Staten Island Ferry
Maintenance & Repair Work Request**

Boat/Terminal: Barberi Date: 10/4/03

Repairs Required/Materials Needed: # 1 AIR Pump /MSD

Needs R/R



No repairs will be made unless this report is made out properly.

Priority: ~~A~~ B

Spvr. Title: _____

Person Requesting Repair/Title Parente

FMF Office Use Only

Work Order # 10060305

Date: 10-6-03

Recommended Trade: _____

FMF Spvr: [Signature]

Date Work Started: _____

Trade: MACH

Date Work Completed: _____

Employee's Assigned to Job

Name	Title	Hours	Name	Title	Hours

Record any changes and or conditions to this request and attach any copies of storeroom requisitions to it.

Foreman's Signature: _____

**New York City
Department of Transportation
Staten Island Ferry
Maintenance & Repair Work Request**

Boat/Terminal: BARBERI,

Date: 10-6-03

Repairs Required/Materials Needed:

2 Boiler fuel Pump

Coupling Broke.
"DIESEL REPAIR"

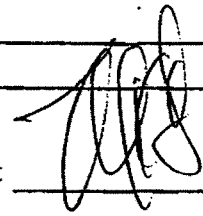
ASAP

No repairs will be made unless this report is made out properly.

Priority:

~~A~~ B

Spvr. Title:



Person Requesting Repair/Title

Peter Rotondo

FMF Office Use Only

Work Order # 10060306

Recommended Trade: _____

Date: 10-6-03

Date Work Started: _____

FMF Spvr: Am

Date Work Completed: _____

Trade: MACH

Employee's Assigned to Job

Name	Title	Hours	Name	Title	Hours

Record any changes and or conditions to this request and attach any copies of storeroom requisitions to it.

Foreman's Signature: _____

**New York City
Department of Transportation
Staten Island Ferry
Maintenance & Repair Work Request**

Boat/Terminal: BARBERT Date: 10-6-03

Repairs Required/Materials Needed:

Boiler MAKE UP
WATER VALVE HANGS UP CAUSING FEED
TANK OVER FLOW.
"Please Replace"

ASAP

No repairs will be made unless this report is made out properly.

Priority: 0

Spvr. Title: [Signature]

Person Requesting Repair/Title: [Signature]

FMF Office Use Only

Work Order # 10060307

Recommended Trade: _____

Date: 10-6-03

Date Work Started: _____

FMF Spvr: [Signature]

Date Work Completed: _____

Trade: 9/2

Employee's Assigned to Job

Name	Title	Hours	Name	Title	Hours

Record any changes and or conditions to this request and attach any copies of storeroom requisitions to it.

Foreman's Signature: _____

**New York City
Department of Transportation
Staten Island Ferry
Maintenance & Repair Work Request**

Boat/Terminal: BARBER Date: 10-6-03

Repairs Required/Materials Needed: NY STEERING
Order TELEGRAPH Binding
BLEET TO REPAIR ASAP
CONTROL ROOM

No repairs will be made unless this report is made out properly.

Priority: A Spvr. Title: Aggr

Person Requesting Repair/Title: Peter Poter

Work Order #		FMF Office Use Only	
<u>10060328</u>			
Recommended Trade:		Date:	<u>10-6-03</u>
Date Work Started:		FMF Spvr.:	<u>Amr.</u>
Date Work Completed:		Trade:	<u>MACH</u>
Employee's Assigned to Job			

Name	Title	Hours	Name	Title	Hours

Record any changes and or conditions to this request and attach any copies of storeroom requisitions to it.

Foreman's Signature: _____

**New York City
Department of Transportation
Staten Island Ferry
Maintenance & Repair Work Request**

DONE

Boat/Terminal: BABCOCK

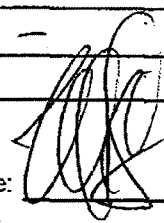
Date: 10/7/03

Repairs Required/Materials Needed:
DOES NOT RUN (#1 AIR COMPRESSOR
(BROKEN N.G.))

- DONE -

No repairs will be made unless this report is made out properly.

Priority: B.

Spvr. Title: 

Person Requesting Repair/Title CR220

FMF Office Use Only

Work Order # 10080301

Recommended Trade: _____

Date: 10-8-03

Date Work Started: _____

FMF Spvr. run

Date Work Completed: _____

Trade: ELECT

Employee's Assigned to Job

Name	Title	Hours	Name	Title	Hours

Record any changes and or conditions to this request and attach any copies of storeroom requisitions to it.

Foreman's Signature: _____

New York City
 Department of Transportation
 Staten Island Ferry
 Maintenance & Repair Work Request

Boat Terminal: AIB Date: 08 OCT 03

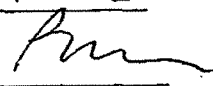
Repairs Required/Materials Needed:
MAIN DECK NYE GATE needs wheel
Replaced.

No repairs will be made unless this report is made out properly.

Priority: B Spvr. Title: 

Person Requesting Repair/Title: Samuel W. / MATE

FMF Office Use Only

Work Order # 10090301 Date: 10-9-03
 Recommended Trade: _____ FMF Spvr: 
 Date Work Started: _____ Trade: PM
 Date Work Completed: _____

Employee's Assigned to Job

Name	Title	Hours	Name	Title	Hours

Record any changes and or conditions to this request and attach any copies of storeroom requisitions to it.
 Foreman's Signature: _____

**New York City
Department of Transportation
Staten Island Ferry
Maintenance & Repair Work Request**

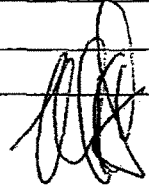
Boat/Terminal: BARBER

Date: 10/9/03

Repairs Required/Materials Needed:
SINK leaking in LADY'S RM.

No repairs will be made unless this report is made out properly.

Priority: B

Spvr. Title: 

Person Requesting Repair/Title D. M. Mate

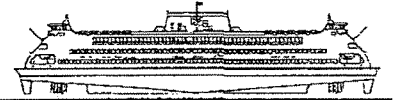
FMF Office Use Only

Work Order # 10100302 Date: 10-10-03
 Recommended Trade: _____ FMF Spvr: Bar
 Date Work Started: _____ Trade: APB
 Date Work Completed: _____

Employee's Assigned to Job

Name	Title	Hours	Name	Title	Hours

Record any changes and or conditions to this request and attach any copies of storeroom requisitions to it.
 Foreman's Signature: _____



Request For Repair

Requested By CME

Vessel (check one)

- BARBERI
- NEWHOUSE
- AUSTEN
- NOBLE
- KENNEDY
- LEGION
- LEHMAN
- COSGROVE
- OIL BARGE # _____
- DERRICK # _____
- FMF (Shop Work)
- FUEL FACILITY
- NEW VESSEL #1
- NEW VESSEL #2
- NEW VESSEL #3
- OTHER

System (check one)

- Main Propulsion
- Steering System
- Propulsion Control
- HVAC
- Generator
- Switchboard
- Compressed Air Sys
- Bilge / Ballast Sys
- Potable Water Sys
- S/W Service Sys
- Sanitary Sys
- Lighting / Wire Sys
- Structure / Hull
- Navigation Sys
- Rescue Equip
- Fire Fighting Sys
- Fuel / Lube Sys
- Gear / Tackle
- Miscellaneous

Equipment I.D. # N/A

Equipment # / Name POTABLE WATER TK

Location (check all applicable)

- Fwd (NYE)
- Aft (SIE)
- Amidships
- Vessel
- Port (Jersey Side)
- Stbd (Brooklyn Side)
- Pilot House
- Control Room
- Bridge Deck
- Hurricane Deck
- Saloon Deck
- Main Deck
- Embark Deck (AJB Cls)
- Engine Room
- Voith Compt
- Steering Compt
- Stern Tube Compt
- Water Tank Compt
- Fuel Tank Compt
- Motor Room
- Fan Room
- Generator Room
- Boiler Room
- Shaft Alley Compt
- Mens Room
- Handicap Room
- Ladies Room
- Emergency DG Compt
- Locker Room
- CO₂ Compt
- MSD Room
- Stack
- Forepeak/Void
- Miscellaneous

Remarks (State briefly repairs to be made or most prominent symptom)

PLEASE REPLACE AIR CHARGE HOSE FOR POTABLE WATER PRESSURE TANK SO THAT SCRAPER VALVES AND AIR ~~CHARGE~~ CHECK ONLY ARE USED - NO DIRECT CONNECTION AS PER USCG REG AND REQUEST

Supervisor / Title [Signature] Date 10/10/03

<i>This section for FMF office use only</i>		Type: _____
WORK ORDER # <u>10130303</u>	TRADE: <u>S/P</u>	Priority: <u>B</u>
FMF SUPERVISOR: <u>[Signature]</u>	DATE: <u>10-13-03</u>	

**New York City
Department of Transportation
Staten Island Ferry
Maintenance & Repair Work Request**

Boat/Terminal: A.J. BARBERI

Date: 10-13-03

Repairs Required/Materials Needed:

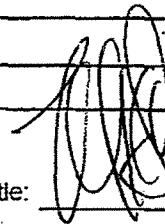
Fuel Pump on #1 BOILER Please replace

No repairs will be made unless this report is made out properly.

Priority:

B

Spvr. Title:



Person Requesting Repair/Title

Thomas Berrigan

FMF Office Use Only

Work Order #

10140301

Recommended Trade:

Date:

10-14-03

Date Work Started:

FMF Spvr:

Am

Date Work Completed:

Trade:

MACT

Employee's Assigned to Job

Name	Title	Hours	Name	Title	Hours

Record any changes and or conditions to this request and attach any copies of storeroom requisitions to it.

Foreman's Signature: _____

New York City
 Department of Transportation
 Staten Island Ferry
 Maintenance & Repair Work Request

Boat/Terminal: Barberis Date: 10-13-03

Repairs Required/Materials Needed:
deck N.Y. end Bklyn side gate is bent
due to missing rungs on chain missing
and becoming fouled on apron and being
lifted

No repairs will be made unless this report is made out properly.

Priority: B. Spvr. Title: [Signature]

Person Requesting Repair/Title: [Signature] mate

FMF Office Use Only

Work Order # 10140302 Date: 10-14-03

Recommended Trade: _____ FMF Spvr: [Signature]

Date Work Started: _____ Trade: B/M

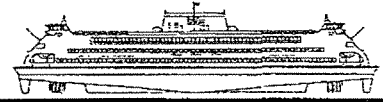
Date Work Completed: _____

Employee's Assigned to Job

Name	Title	Hours	Name	Title	Hours

Record any changes and or conditions to this request and attach any copies of storeroom requisitions to it.

Foreman's Signature: _____



Request For Repair

Requested By B P Walski

Vessel (check one)

- | | | | |
|--|--------------------------------|---|-------------------------------------|
| <input checked="" type="radio"/> BARBERI | <input type="radio"/> KENNEDY | <input type="radio"/> OIL BARGE # _____ | <input type="radio"/> NEW VESSEL #1 |
| <input type="radio"/> NEWHOUSE | <input type="radio"/> LEGION | <input type="radio"/> DERRICK # _____ | <input type="radio"/> NEW VESSEL #2 |
| <input type="radio"/> AUSTEN | <input type="radio"/> LEHMAN | <input type="radio"/> FMF (Shop Work) | <input type="radio"/> NEW VESSEL #3 |
| <input type="radio"/> NOBLE | <input type="radio"/> COSGROVE | <input type="radio"/> FUEL FACILITY | <input type="radio"/> OTHER |

System (check one)

- | | | | | |
|--|---|--|---|---------------------------------------|
| <input type="radio"/> Main Propulsion | <input type="radio"/> Generator | <input type="radio"/> Potable Water Sys | <input type="radio"/> Structure / Hull | <input type="radio"/> Fuel / Lube Sys |
| <input type="radio"/> Steering System | <input type="radio"/> Switchboard | <input type="radio"/> S/W Service Sys | <input type="radio"/> Navigation Sys | <input type="radio"/> Gear / Tackle |
| <input type="radio"/> Propulsion Control | <input type="radio"/> Compressed Air Sys | <input type="radio"/> Sanitary Sys | <input type="radio"/> Rescue Equip | <input type="radio"/> Miscellaneous |
| <input type="radio"/> HVAC | <input type="radio"/> Bilge / Ballast Sys | <input checked="" type="radio"/> Lighting / Wire Sys | <input type="radio"/> Fire Fighting Sys | |

Equipment I.D. #

N/A

Equipment # / Name

Location (check all applicable)

- | | | | | |
|--|--|--|---|---|
| <input type="radio"/> Fwd (NYE) | <input checked="" type="radio"/> Pilot House | <input type="radio"/> Engine Room | <input type="radio"/> Fan Room | <input type="radio"/> Emergency DG Compt |
| <input checked="" type="radio"/> Aft (SIE) | <input type="radio"/> Control Room | <input type="radio"/> Voith Compt | <input type="radio"/> Generator Room | <input type="radio"/> Locker Room |
| <input type="radio"/> Amidships | <input type="radio"/> Bridge Deck | <input type="radio"/> Steering Compt | <input type="radio"/> Boiler Room | <input type="radio"/> CO ₂ Compt |
| <input type="radio"/> Vessel | <input type="radio"/> Hurricane Deck | <input type="radio"/> Stern Tube Compt | <input type="radio"/> Shaft Alley Compt | <input type="radio"/> MSD Room |
| <input type="radio"/> Port (Jersey Side) | <input type="radio"/> Saloon Deck | <input type="radio"/> Water Tank Compt | <input type="radio"/> Mens Room | <input type="radio"/> Stack |
| <input type="radio"/> Stbd (Brooklyn Side) | <input type="radio"/> Main Deck | <input type="radio"/> Fuel Tank Compt | <input type="radio"/> Handicap Room | <input type="radio"/> Forepeak/Void |
| | <input type="radio"/> Embark Deck (AJB CIs) | <input type="radio"/> Motor Room | <input type="radio"/> Ladies Room | <input type="radio"/> Miscellaneous |

Remarks (State briefly repairs to be made or most prominent symptom) :

SIE - Bulb broken off in socket. Request repair

Supervisor / Title

Date 10-14-03

This section for FMF office use only

WORK ORDER #: 10140303

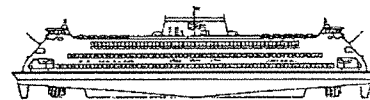
TRADE: WLS

Type: _____

Priority: B

FMF SUPERVISOR: Amr.

DATE: 10-14-03



Request For Repair

Requested By B Walsh 13/oct/03

Vessel (check one)

- | | | | |
|--|--------------------------------|---|-------------------------------------|
| <input checked="" type="radio"/> BARBERI | <input type="radio"/> KENNEDY | <input type="radio"/> OIL BARGE # _____ | <input type="radio"/> NEW VESSEL #1 |
| <input type="radio"/> NEWHOUSE | <input type="radio"/> LEGION | <input type="radio"/> DERRICK # _____ | <input type="radio"/> NEW VESSEL #2 |
| <input type="radio"/> AUSTEN | <input type="radio"/> LEHMAN | <input type="radio"/> FMF (Shop Work) | <input type="radio"/> NEW VESSEL #3 |
| <input type="radio"/> NOBLE | <input type="radio"/> COSGROVE | <input type="radio"/> FUEL FACILITY | <input type="radio"/> OTHER |

System (check one)

- | | | | | |
|--|---|--|---|---------------------------------------|
| <input type="radio"/> Main Propulsion | <input type="radio"/> Generator | <input type="radio"/> Potable Water Sys | <input type="radio"/> Structure / Hull | <input type="radio"/> Fuel / Lube Sys |
| <input type="radio"/> Steering System | <input type="radio"/> Switchboard | <input type="radio"/> S/W Service Sys | <input type="radio"/> Navigation Sys | <input type="radio"/> Gear / Tackle |
| <input type="radio"/> Propulsion Control | <input type="radio"/> Compressed Air Sys | <input type="radio"/> Sanitary Sys | <input type="radio"/> Rescue Equip | <input type="radio"/> Miscellaneous |
| <input type="radio"/> HVAC | <input type="radio"/> Bilge / Ballast Sys | <input checked="" type="radio"/> Lighting / Wire Sys | <input type="radio"/> Fire Fighting Sys | |

Equipment I.D. #

N/A

Equipment # / Name

SPOT LIGHT

Location (check all applicable)

- | | | | | |
|---|---|--|---|--|
| <input checked="" type="radio"/> Fwd (NYE) | <input type="radio"/> Pilot House | <input type="radio"/> Engine Room | <input type="radio"/> Fan Room | <input type="radio"/> Emergency DG Compt |
| <input type="radio"/> Aft (SIE) | <input type="radio"/> Control Room | <input type="radio"/> Voith Compt | <input type="radio"/> Generator Room | <input type="radio"/> Locker Room |
| <input type="radio"/> Amidships | <input type="radio"/> Bridge Deck | <input type="radio"/> Steering Compt | <input type="radio"/> Boiler Room | <input type="radio"/> CO2 Compt |
| <input checked="" type="radio"/> Vessel | <input checked="" type="radio"/> Hurricane Deck | <input type="radio"/> Stern Tube Compt | <input type="radio"/> Shaft Alley Compt | <input type="radio"/> MSD Room |
| <input type="radio"/> Port (Jersey Side) | <input type="radio"/> Saloon Deck | <input type="radio"/> Water Tank Compt | <input type="radio"/> Mens Room | <input type="radio"/> Stack |
| <input checked="" type="radio"/> Stbd (Brooklyn Side) | <input type="radio"/> Main Deck | <input type="radio"/> Fuel Tank Compt | <input type="radio"/> Handicap Room | <input type="radio"/> Forepeak/Void |
| | <input type="radio"/> Embark Deck (AJB CIs) | <input type="radio"/> Motor Room | <input type="radio"/> Ladies Room | <input type="radio"/> Miscellaneous |

Remarks (State briefly repairs to be made or most prominent symptom) :

Bulb is extinguished

Supervisor / Title

[Signature]

Date

10/14/03

This section for FMF office use only

WORK ORDER #:

10140304

TRADE:

ELECT

Type:

Priority:

B

FMF SUPERVISOR:

[Signature]

DATE:

10-14-03

New York City
 Department of Transportation
 Staten Island Ferry
 Maintenance & Repair Work Request

Boat/Terminal: Barber's Date: 10-14-03

Repairs Required/Materials Needed:
on exit door middle door refasten exit sign
main deck 5th deck

No repairs will be made unless this report is made out properly.

Priority: 8 Spvr. Title: [Signature]

Person Requesting Repair/Title: [Signature]

FMF Office Use Only

Work Order # 10140305 Date: 10-14-03
 Recommended Trade: _____ FMF Spvr: [Signature]
 Date Work Started: _____ Trade: T/S
 Date Work Completed: _____

Employee's Assigned to Job

Name	Title	Hours	Name	Title	Hours

Record any changes and or conditions to this request and attach any copies of storeroom requisitions to it.

Foreman's Signature: _____

**New York City
Department of Transportation
Staten Island Ferry
Maintenance & Repair Work Request**

Boat/Terminal: Barber's Date: 10/15/03

Repairs Required/Materials Needed: BOTH BOILERS:

- ① PLEASE supply proper PACKING
 - ② Need 8 new FLANGE (Packing) RETAINERS FOR FEED WATER PUMPS
- (Parts)

No repairs will be made unless this report is made out properly.

Priority: A Spvr. Title: AGH

Person Requesting Repair/Title _____

Work Order # <u>①-10150303</u>	FMF Office Use Only
Recommended Trade: _____	Date: <u>10-15-03</u>
Date Work Started: _____	FMF Spvr: <u>Am</u>
Date Work Completed: _____	Trade: <u>Mech</u>

Employee's Assigned to Job					
Name	Title	Hours	Name	Title	Hours

Record any changes and or conditions to this request and attach any copies of storeroom requisitions to it.

Foreman's Signature: _____

New York City
 Department of Transportation
 Staten Island Ferry
 Maintenance & Repair Work Request

Boat/Terminal: BARBERI

Date: 10/15/03

Repairs Required/Materials Needed: #1 Boiler:

FEED WATER PUMP HALF FLANGE
FOR PACKING BROKEN. INSIDE, CLOSEST
TO MOTOR, BOTTOM.

No repairs will be made unless this report is made out properly.

Priority: B.

Spvr. Title: BLM

Person Requesting Repair/Title: Parento

FMF Office Use Only	
Work Order # <u>10150305</u>	Date: <u>10-15-03</u>
Recommended Trade: _____	FMF Spvr. <u>BLM</u>
Date Work Started: _____	Trade: <u>Mach.</u>
Date Work Completed: _____	

Employee's Assigned to Job					
Name	Title	Hours	Name	Title	Hours

Record any changes and or conditions to this request and attach any copies of storeroom requisitions to it.

Foreman's Signature: _____

New York City
 Department of Transportation
 Staten Island Ferry
 Maintenance & Repair Work Request

Boat/Terminal: Barberi Date: 10-14-03

Repairs Required/Materials Needed:
bridge deck SI general alarm bell
at the top of the ramp out of
order

No repairs will be made unless this report is made out properly.

Priority: A Spvr. Title: Rgn

Person Requesting Repair/Title: Greg Van Lant

FMF Office Use Only

Work Order # 10150306 Date: 10-15-03
 Recommended Trade: _____ FMF Spvr: AW
 Date Work Started: _____ Trade: ELEC.
 Date Work Completed: _____

Employee's Assigned to Job

Name	Title	Hours	Name	Title	Hours

Record any changes and or conditions to this request and attach any copies of storeroom requisitions to it.

Foreman's Signature: _____

New York City
 Department of Transportation
 Staten Island Ferry
 Maintenance & Repair Work Request

Boat/Terminal: Barberio Date: 10-14-03

Repairs Required/Materials Needed:
located on main deck by rescue
boat # 3 out of North
general alarm bell

No repairs will be made unless this report is made out properly.

Priority: A Spvr. Title: Asst. Mgr.

Person Requesting Repair/Title: Gregory J. Mate

FMF Office Use Only

Work Order # 10150307 Date: 10-15-03
 Recommended Trade: _____ FMF Spvr: Am.
 Date Work Started: _____ Trade: Elect.
 Date Work Completed: _____

Employee's Assigned to Job

Name	Title	Hours	Name	Title	Hours

Record any changes and or conditions to this request and attach any copies of storeroom requisitions to it.

Foreman's Signature: _____

**New York City
Department of Transportation
Staten Island Ferry
Maintenance & Repair Work Request**

Boat/Terminal: A.J. Barberi

Date: 10-14-03

Repairs Required/Materials Needed: Reach Rod Labeled
Diesel oil Fill' - (OVERFLOW)
Valve. Turns freely at 90° angle gear located above
Storage Tank Fill Valve.

Notes: To Prep, Overflow Valve cannot be
Tested unless Storage Tank Valves are secured by
NOTE: Can Be opened locally to prevent filling Tank. (Crew)
No repairs will be made unless this report is made out properly. Knuckle Joint

Priority: B

Spvr. Title: ALH

Person Requesting Repair/Title CAR

FMF Office Use Only					
Work Order # <u>10150308</u>		Date: <u>10-15-03</u>			
Recommended Trade: _____		FMF Spvr: <u>ALH</u>			
Date Work Started: _____		Trade: <u>Mach.</u>			
Date Work Completed: _____					
Employee's Assigned to Job					
Name	Title	Hours	Name	Title	Hours
Record any changes and or conditions to this request and attach any copies of storeroom requisitions to it.					
Foreman's Signature: _____					

**New York City
Department of Transportation
Staten Island Ferry
Maintenance & Repair Work Request**

Boat/Terminal: BARBERI

Date: 10/14/2003

Repairs Required/Materials Needed: #2 Boiler Bottom
blow valve. Basket packing gland nut
turning with valve stem. Valve needs to
be replaced.

*repaired
by crew
OPE*

No repairs will be made unless this report is made out properly.

Priority: SAFETY/INSPECTION

Spvr. Title: Prsn

Person Requesting Repair/Title: CA

FMF Office Use Only	
Work Order # <u>N/A</u>	Date: <u>10-15-03</u>
Recommended Trade: _____	FMF Spvr: <u>Prsn</u>
Date Work Started: _____	Trade: <u>SIF</u>
Date Work Completed: _____	

Employee's Assigned to Job					
Name	Title	Hours	Name	Title	Hours

Record any changes and or conditions to this request and attach any copies of storeroom requisitions to it.

Foreman's Signature: _____