M109/M992 LETTER OF REQUEST (LOR)

NOTE: This checklist must be completed by a country representative and returned to USASAC-RA. TACOM SAMD will not develop the training cost data unless this checklist is accurately and fully completed in a timely manner not to exceed 30-days. One completed checklist per model type of vehicle!

The information provided on this checklist supports the TACOM Commanders Guidance to reduce contracting delays by accurately understanding the Countries requirements during LOA Development!

The responsibility to coordinate and obtain this information rests with USASAC-RA County Program Manager (CPM).

 M109/M992 Letter of Request (LOR) Checklist
 Date:

 Name of Country_____
 Name of SAO--POC_____

Telephone Number_____

Email address

1. Desired Models and Quantity Required/requested. Please select preferred model and quantity. M109A5 digital fire control and M992 variant applications reflected in item 5.

Model	Nomenclature	NSN	Gen Code
 M109A5 M109A6 M992A2 	Howitzer, Medium, Self-Propelled:155mm Howitzer, Medium, Self-Propelled:155mm Carrier, Ammunition, Tracked (FAASV)	2350-01-281-1719 2350-01-305-0028 2350-01-368-9500	3FC

Note: If a specially configured M109/M992: i.e. Digital Fire Control, Forward Observer, Command Center, is desired; please add an attachment describing the requirement in detail (Please use continuation sheet):

2. Vehicle Mission/Purpose (Note: A separate checklist must be completed for each vehicle with a separate mission/purpose):

- a) What function will the vehicle be used for?
- b) Provide as much detail as possible regarding the mission and purpose of the requested vehicle and the type of environment in which it will be deployed: _____

3. Paint Color. Please select paint color (Camouflage paint is three color pattern CARC paint):

- CARC 686 Desert Tan
- CARC 383 Green

____Other (Special Request)

4. Desired Radio Configuration.	Please indicate	if standard communications/radio	equipment mounting	hardware is required:
YesNo				
If Yes: Indicate: SINCGARS	Harris	Other		

5. Optional Equipment. Please select the desired optional equipment.

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Basic Initial Issue (BII)

Special tools (slings, cradles, charging/purging kits, alignment and test devices)

____ Crew serve weapons and mount (1 per vehicle, specify M2 .50 machine gun or MK19 grenade launcher)

_____Advanced Field Artillery Tactical Data System (AFATDS, required for operation of gun based digital Fire Control)

6. Concurrent Spare Parts. How many years of Concurrent Spare Parts (CSP) support do you require?

1 Year 2 Years 3 Years

(Engines, Transmissions, Transfer Assemblies and Differentials will be separate lines on the LOA)

7. Maintenance and Operator Training. Standard training program consists of a Operator and Maintenance (organizational, direct support, and general support) training course. There are many suppliers for training and if the customer prefers the Original Equipment Manufacturer, a request for sole source in accordance with the SAMM needs to be furnished for acquisition execution.

a. Do you want the standard training program? Yes _____No____

b. If you prefer a tailored program, please specify on attached memorandum/letter:

c. Do you prefer training in the United States (Yes___) and/or at your location (Yes___, at this location, facility)?

- d. Total Number of Students Operator Training
- e. Total Number of Students Maintenance Training _____?
- e. Is English language acceptable? Yes____No____If no, what language and dialect is desired?_____

8. Is Sole Source procurement needed by the customer? _____Yes____No

If Yes, please provide name of contractor

Note: Customer must submit Sole Source justification to USASAC prior to LOA submission.

9. MAINTENANCE TRAINING: (from question 6e)

a. Students' level of experience maintaining the equipment he is being trained to maintain:

____ Operator level: Check oil, fuel, tires

____ Unit level: Trouble shooting and component replacement

____ Repair Facility: Overhauling engines etc.

Other relevant experience:

b. State the level of proficiency which you require the students to be at the end of the course:

____ Operator level: Operate the item, Check oil, fuel, tires

____ Unit level: Trouble shooting and component replacement.

____ Repair Facility: Overhauling engines etc.

___ Other (Please use separate sheet if necessary) _____

10. Technical Manuals. Two copies of Standard English M109/M992 Technical Manuals (TM) and CD-ROM will be provided with each FMS case. One Operator's Manual will be included in the BII of each vehicle:

How many additional sets of Technical Manuals are required?

How many additional CD-ROM are required?

11. Tools. Mandatory Tool Set Quantity Computation (NOTE: Minimum of one set of special tools recommended per maintenance location regardless of M109/M992 quantity):

- a. Field Level Maintenance (FLM) Kit 5180-01-545-9967,
- b. Sustainment Level Maintenance Tool Kit,

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- c. FMTVA1P2 FLM Tool Kit 5180-01-586-9777,
- d. M1089A1P2 FLM Tool Kit 57K2708-005,
- e. M1084/6 FLM Tool Kit 4910-606-8691
- f. M1148 FLM Tool Kit 57K2708-007

Do you need a General Mechanics, Organizational, Direct Support, or General Support tool kit which includes common tools, wrenches and sockets? Yes No

The **AN/PSM-95D MSD V3 with ICE Kit. (6625-01-599-9652)** is <u>the newest</u> U.S. Army electronic test set which can diagnose the vehicle electronic components. If desired, please indicate the number of diagnostic test sets required_____. (NOTE: This test set is not mandatory to perform M109/M992maintenance)

12. Quality Assistance Team. Do you desire a U.S. Government/contractor team to assist de-process these vehicles upon arrival and to insure all are operating correctly and in accordance with the LOA? _____Yes____No.

13. Field Service Representative. An Field Service Representative (FSR) can deliver, train and maintain your new M109/M992 for a specified time. Do you want an (FSR)?____Yes____No. For how many months?_____

Note: There are many suppliers for support and if the customer prefers the Original Equipment Manufacturer, a request for sole source in accordance with the SAMM needs to be furnished for acquisition execution.

Is Sole Source procurement needed by the customer? Yes No If Yes, please provide name of contractor. Note: Customer must submit Sole Source justification to USASAC prior to LOA submission.

14. CONSTRAINTS? (COST LIMITATION, DATES, HOLIDAYS)

15. TYPICAL "WORK DAY/WORK WEEK" IN HOST COUNTRY:							
Number of hours per day	Number of days per week	Days off:					

16. CUSTOMER INSPECTION-COORDINATOR/COTR (please provide 2 POCs)

PRIMARY:	ALTERNATE:
Name:	NAME:
Email:	email:
Phone (include country/city code)	phone:
Fax number)	Fax number:
Cell/Mobil phone:	Cell/mobile phone:

17. Please identify any other unique requirements not specified above _____