

**REQUEST FOR HAZARDOUS DUTY OR ENVIRONMENTAL  
DIFFERENTIAL PAY DETERMINATION**

The proponent agency is MENG-HRO

FROM:

THRU: SAFETY OFFICER

TO: MENG-HRO

Camp Keyes  
Augusta, ME 04333-0033

**THIS FORM MUST BE SUBMITTED THROUGH THE EMPLOYEE'S SUPERVISOR FOR CONCURRENCE, IAW PARAGRAPH 2 2, SPMR: 550- 37**

THE FOLLOWING WORK SITUATION IS SUBMITTED FOR DETERMINATION OF:

- HAZARDOUS PAY DIFFERENTIAL (GS Only)       ENVIROMENTAL PAY DIFFERENTIAL (WG, WL, WS, Only)

1. PROVIDE A DETAILED DESCRIPTION OF THE SEVERE HAZARD, PHYSICAL HARDSHIP, OR WORKING CONDITION.

2. PROVIDE A BRIEF EXPLANATION OF THE ACTIONS TAKEN IN AN ATTEMPT TO ELIMINATE THE CONDITION.

3. LIST THE CLASIFICATION(S) AND GRADE(S) OF TECHNICIAN(S) PERFORMING THE WORK.

4. INDICATE THE APPLICABLE TECHNICAL INSTRUCTION COVERING THE WORK SITUATION.

5. INDICATE THE APPLICABLE SAFTEY REGULATION COVERING THE WORK SITUATION.

6. HAS THERE BEEN A SAFTEY OR ENVIROMENTAL HEALTH REPORT PREPARED FOR THE SITUATION.

- YES       NO       UNKNOWN (If yes, provide a copy as an attachment to this form)

7. INDICATING THE LENGTH OF TIME THE SITUATION WILL EXIST.

- MONTHS     YEARS     INDEFINITE

**ALL SIGNATURES MUST BE PROVIDED PRIOR TO FORWARDING TO HRO.**

SUBMITTED BY

SIGNATURE

DATE:

SUPERVISOR

SIGNATURE

DATE:

SAFETY OFFICER

SIGNATURE

DATE:

**HUMAN RESOURCES OFFICE.**

APPROVED FOR PAYMENT

DISAPPROVED (Return to submitter)

NAME

TITLE

SIGNATURE

DATE:

FORWARDED TO SUPPORTING PAY BRANCH

DATE:

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