| OCS Tracking #: | TBC #: | Contract # | TO/DO: |
|---|---|---|---|

# GOVERNMENT FURNISHED LIFE SUPPORT VALIDATION (GFLSV) FORM

**Afghanistan Area of Operations (AOR)**

| Type of Request: | ☐ Initial (New Requirement) | ☐ Initial (Follow-On to Existing Requirement) | ☐ Change Form (Any Increase, Decrease, Location Change)<br>Changes to the above must receive approval prior to affecting the change |
|---|---|---|---|

**REQUIRING ACTIVITY INFORMATION**

| | | | | |
|---|---|---|---|---|
| NAME/DoDAAC of Requiring Activity: | Name: | Address: | | |
| | | City: | State: | Zip Code: |
| Point of Contact (POC) | Name: | Title: | Email: | Phone: |
| Physical Address: | | | | |

**IN-COUNTRY SPONSOR INFORMATION - (MANDATORY)**

| | | | | |
|---|---|---|---|---|
| NAME/DoDAAC of Requiring Activity: | | | Redeployment Date: (DD/MM/YY) | |
| Point of Contact (POC) | Name: | Title: | Email: | Phone: |
| Afghanistan Address: | | | | |

**IN-COUNTRY CONTRACTING OFFICER REPRESENTATIVE (COR) - (MANDATORY)**

| | | | | |
|---|---|---|---|---|
| NAME/DoDAAC of Requiring Activity: | | | Redeployment Date: (DD/MM/YY) | |
| COR: | Name: | Title: | Email: | Phone: |
| Afghanistan Address: | | | | |

**ADMINISTERING CONTRACTING OFFICE - (MANDATORY)**

| | | | | |
|---|---|---|---|---|
| NAME/DoDAAC of Requiring Activity: | | | Contract number | |
| | | | Task/Delivery Order # | |
| Contracting Officer | Name: | Title: | Email: | Phone: |
| Contracting Specialist | Name: | Title: | Email: | Phone: |

**DESCRIPTION OF THE REQUIREMENT**

| | | | |
|---|---|---|---|
| Description of the requirement: | Total Contract Period of Performance | | |
| | Base Period | FROM: | TO: |
| | Last Option | FROM: | TO: |
| Total Personnel Supported at this location: | Total Personnel Supported on this contract: | | |
| Location where GFLS is requested: | Period of Performance at this Location | | |
| | Base Period | FROM: | TO: |
| | Last Option | FROM: | TO: |

**U.S. Citizens [QTY ]**

Contractor Status CAAF[1] QTY [ ] Non-CAAF[1] QTY [ ]

| | | |
|---|---|---|
| ☐ APO/FPO/MPO/DPO/Postal Services | ☐ Fuel Authorized | ☐ MILAIR |
| ☐ Billeting (Primary Duty Location) | ☐ Govt Furnished Meals[2] | ☐ MWR |
| ☐ Common Access Card (CAC) | ☐ Military Clothing | ☐ Transportation[3] |
| ☐ Installation Access Badge | ☐ Military Exchange | ☐ Embassy Services[4] |
| ☐ DFAC Access[2] | ☐ Laundry | ☐ None |
| ☐ Excess Baggage | ☐ Mil Issue Equip | |

| OCS Tracking #: | TBC #: | Contract # | TO/DO: |
|---|---|---|---|

**Other Country National (OCN) [QTY ]**

Contractor Status CAAF[1] QTY [ ] Non-CAAF[1] QTY [ ]

| | | |
|---|---|---|
| ☐Billeting (Primary Duty Location) | ☐Fuel Authorized | ☐Mil Issue Equip |
| ☐Common Access Card (CAC) | ☐Govt Furnished Meals[2] | ☐MILAIR |
| ☐Installation Access Badge | ☐Military Clothing | ☐MWR |
| ☐DFAC Access[2] | ☐Military Exchange | ☐Transportation[3] |
| ☐Excess Baggage | ☐Laundry | ☐None |

**Local National [QTY ]**

| | | |
|---|---|---|
| ☐Billeting (Primary Duty Location) | ☐Fuel Authorized | ☐Mil Issue Equip |
| ☐Common Access Card (CAC) | ☐Govt Furnished Meals[2] | ☐MILAIR |
| ☐Installation Access Badge | ☐Military Clothing | ☐MWR |
| ☐DFAC Access[2] | ☐Military Exchange | ☐Transportation[3] |
| ☐Excess Baggage | ☐Laundry | ☐None |

Note 1: CAAF means Contractors Authorized to Accompany the Force
Note 2: Due to theater drawdown efforts, DFACs may not be fully operational. Hot meals may be reduced from three per day to less or none. MREs may be substituted for DFAC-provded meals. Contractors will receive the same meal standard as military and DoD civilian personnel.
Note 3: Means other than MILAIR
Note 4: The type and amount of support that the US Embassy Mission in Kabul, Afghanistan provides to contractors, if any, must be coordinated in advance between the US Mission and the contracting agency in accordance with Department of State Foreign Affairs Handbook, 2-FAH-2. Contractors are not authorized to deploy personnel requiring US Mission support prior to receiving clearance from the contracting officer.

**REQUIRING ACTIVITY CERTIFICATION**

I hereby certify the information above is true and correct to the best of my knowledge and belief. The requirement is supported by an In-Country Sponsor and has an In-Country Contracting Officer Representative (COR), or a waiver has been obtained.

**REMARKS**

| Name: | Title: | Email: | Phone: |
|---|---|---|---|

| Signature | Date: |
|---|---|

**BOS-I/GARRISON COMMANDER REVIEW & APPROVAL**

☐ Approved ☐ Disapproved (See remarks) ☐ Partially Approved (See remarks)

**REMARKS**

| Name: | Title: | Email: | Phone: |
|---|---|---|---|

| Signature | Date: |
|---|---|

**USFOR-A OCS REVIEW & APPROVAL (REQUIRED FOR ALL CHANGE FORMS)**

☐ Approved ☐ Disapproved (See remarks) ☐ Partially Approved (See remarks)

**REMARKS**

| Name: | Title: | Email: | Phone: |
|---|---|---|---|

| Signature | Date: |
|---|---|

| INSTRUCTIONS FOR THE USE OF THE GOVERNMENT FURNISHED LIFE SUPPORT VALIDATION (GFLSV) REQUEST & APPROVAL FORM |
|---|
| The purpose of this form is to verify that the expected Government Furnished Life Support (GFLS) is available at the specific location in theater prior to the receipt of contractor proposals/quotes and before contractor personnel arrive in theater. All GFLS is provided to the contractor on an as-available basis. The contractor shall be notified that the levels and types of support may be lowered to expeditionary standards at any time as dictated by the mission. Contracting Officers will check the appropriate boxes on this GFLSV form to identify the requested GFLS, receive the requiring activity's signature, and then submit to the Theater Business Clearance (TBC) office for pre-solicitation approval. The Contracting Officer will then update the GFLSV form as necessary, route through the in-country sponsor or Contracting Officer Representative (COR) to the BOS-I/Garrison Commander with a copy of the Performance Work Statement (PWS)/Scope of Work (SOW) for approval. The completed and approved GFLSV will be submitted to with the final request for pre-award TBC. The contracting office/requiring activity will notify the BOS-I/Garrison Commander of any change to the number of supported contractor personnel within five (5) business days. The BOS-I/Garrison Commander will notify the contracting office/requiring activity of any changes to conditions that affect the provisions of GFLS.<br><br>1. Individual forms are required for each base/installation that will host DoD contractors. Only the most current approved GFLSV form shall be attached with the Theater Business Clearance (TBC) request. Contracting and requiring activities shall plan for fifteen (15) calendar days for GFLSV review and approval by the BOS-I/Garrison Commander.<br><br>2. All references to location mean any installation, camp, base, or FOB<br><br>3. An in-country COR and an in-country sponsor are required prior to GFLSV approval.<br><br>4. GFLSV approval is required before Theater Business Clearance (TBC) is granted and a SPOT LOA is issued.<br><br>5. If Gov't requirements change resulting in an increase or decrease in GFLS required, a change GFLSV form is required to be submitted by the requiring activty and approved by USFOR-A OCS.<br><br>6. After award, the amount of GFLS (by type, quantity of personnel, and location) approved will be compared to the Contractor's SPOT LOA (by type, quantity of personnel, and location). Contractors are not authorized to receive GFLS in excess of the GFLS approved, by location. The requiring activity and contracting activity will be notified of any instance when the contractor is operating above approved GFLS levels and requested to take immediate corrective action.<br><br>7. Contracting activities shall ensure solicitations/contracts notify the contractor that the levels and types of support may be lowered to expeditionary standards. Contractors should be aware authorized GFLS will be provided on an "as-available" basis. Expeditionary standards will be base specific, and may include down grading from permanent housing (b-huts, hardened buildings) to temporary tents or other facilities. |