

REQUEST FOR CLEARANCE OR CANCELLATION OF A STANDARD OR OPTIONAL FORM OR EXCEPTION

FOR GSA USE ONLY

INSTRUCTIONS:

- For new and revised Standard and Optional forms, complete items 1 through 15b and 22 through 46. For exceptions to Standard and Optional forms, complete items 1 through 15b, plus items 38 through 40b. Forward the original and two copies of this form along with three copies of the items listed below to:

General Services Administration (KMAO)
Washington, D.C. 20405

- Supporting statement describing the situation or problem which makes the initiation, revision, cancellation, or deviation from this form necessary and desirable. (For exceptions, explain why agency cannot use form as promulgated or printed.) List names, titles and organizations of persons outside the promulgating/sponsoring agency with whom this material was discussed or coordinated. Include concurrences as well as major problems on which agreement could not be reached. Also, include an assessment of the effect on the process which the form supports and the anticipated increase or decrease in the cost of that process.

- Draft of form for all requests except cancellations.

- List of potential user agencies and their project annual usage.

- Proposed implementing or canceling regulation /directive (for standard forms) or availability announcement (for optional forms).

- Printing specifications on Standard Form 1, Standard Form 1C, GPO Form 1026a, or GPO Form 2511, as appropriate.

- Other appropriate documentation.

- If form is to be used for public reporting (5 CFR 1320), include three copies of Standard Form 83 and supporting documentation. If form is an interagency report, include two copies of Standard Form 360 and one set of supporting documents.

SPECIAL INSTRUCTIONS:

- Complete and submit a separate set of clearance documents for each form for which clearance is requested (i.e., if one form is being canceled and replaced with another form, submit two sets of documents; one set to cancel the old form and another set to establish the new form). However, if a form is being revised and the old stock disposed of under the same National Stock Number, submit only one set of clearance documents.

1. REQUESTING DEPARTMENT OR AGENCY		2. REQUESTING BUREAU OR OFFICE		3. DATE REQUEST INITIATED	
4. TYPE OF ACTION (X as applicable) <input type="checkbox"/> NEW <input type="checkbox"/> EXCEPTION <input type="checkbox"/> OTHER (Specify) _____ <input type="checkbox"/> REVISION <input type="checkbox"/> CANCELLATION				5. TYPE OF FORM (X one) <input type="checkbox"/> STANDARD (SF) <input type="checkbox"/> OPTIONAL (OF)	
6. PROPOSED FORM TITLE		7. PRESENT EDITION DATE	8. PROPOSED EDITION DATE	9. PRESENT SF OR OF NUMBER	
<input type="checkbox"/> TITLE REVISED (X if applicable)					
3. PROMULGATING REGULATION OR DIRECTIVE (Required for Standard Forms ONLY)		10b. DATE OF REGULATION	11. OTHER CLEARANCES (X only if applicable) <input type="checkbox"/> OMB NUMBER _____ EXPIRATION DATE _____ <input type="checkbox"/> INTERAGENCY RPT. NO. _____ EXPIRATION DATE _____		
12. HOW FEDERAL INFORMATION PROCESSING STANDARDS (FIPS) APPLY TO FORM (Automated forms only)(X one) <input type="checkbox"/> CONFORMS TO FIPS <input type="checkbox"/> NOT APPLICABLE TO FIPS <input type="checkbox"/> DEVIATION APPROVED (See attachment)		13. RELATED STANDARD OR OPTIONAL FORMS			
14. OFFICIAL SUBMITTING REQUEST (Name, title and signature)		15. AGENCY STANDARD AND OPTIONAL FORMS LIAISON REPRESENTATIVE (Name and signature)			
14a. TELEPHONE NUMBER (Include Area Code)		14b. DATE SIGNED		15a. TELEPHONE NUMBER (Include Area Code)	
				15b. DATE SIGNED	

CLEARANCE ACTION

16. APPROVED		17a. SIGNATURE OF RECOMMENDING OFFICIAL IN PROMULGATING/SPONSORING AGENCY (For Exceptions Only)		17b. DATE SIGNED	
YES	NO				
		18a. SIGNATURE OF CLEARANCE OFFICIAL (INFORMATION RESOURCES MANAGEMENT SERVICE/GSA)		18b. DATE SIGNED	
19. FORM NUMBER ASSIGNED		20. EDITION DATE		21a. FOLLOWING EXCEPTION APPROVAL STATEMENT MUST APPEAR ON EXCEPTED FORM: EXCEPTION TO APPROVED BY GSA/IRMS	
				21b. SEND THREE COPIES OF PRINTED EXCEPTION TO: GENERAL SERVICES ADMIN. KMAO WASHINGTON, DC 20405	

► STOCK EVALUATION (Complete for old stock of form revised on this request.)**EXISTING STOCK**

(Obtain this information from GSA's Office of Federal Supply and Services (FSS) (472-2018) and evaluate against importance of revision in blocks 28-31b and 46. Note that units are EA (Each), HD (Hundred), BX (Box), and PG (Package).

22. QUANTITY (OF UNITS) ON HAND AND DUE IN	23. MONTHLY DEMAND RATE	24. MONTHS OF STOCK (22÷23)	25. COST PER UNIT	26. ESTIMATED VALUE OF STOCK (22X25) \$	27. DATE INFORMATION OBTAINED
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STOCK DISPOSITION (Complete for revised or canceled forms.)

28. FORM NUMBER	29. EDITION DATE	30. NATIONAL STOCK NUMBER OF FORM TO BE PHASED OUT OR MADE OBSOLETE	31. DISPOSITION ACTION a. CODE* b. EFFECTIVE DATE
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***DISPOSITION CODES**

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| 1 — Discontinue form immediately and dispose of existing stock | 3 — Continue to issue existing stocks, but do not reprint. | 5 — Order new edition immediately; dispose of existing forms upon receipt of revised item. |
| 2 — Discontinue form on date and dispose of stock at that time. | 4 — Deplete existing forms before issuing revised or modified edition. | 6 — Other (Explain) _____ |

► PROCUREMENT AND STOCKING OF NEW OR REVISED FORM

32. MANDATORY USE DATE	33. NATIONAL STOCK NUMBER (If assigned)	34. UNIT OF ISSUE	35. ESTIMATED GOVT-WIDE USAGE (No. forms) a. FIRST YEAR a. SUCCEEDING YEARS
36. USAGE TYPE (X one) <input type="checkbox"/> CONSTANT <input type="checkbox"/> VARIABLE (Specify in item 46.)	37. STOCKING INSTRUCTIONS (X applicable) <input type="checkbox"/> STOCK IN GSA SUPPLY DISTRIBUTION FACILITIES <input type="checkbox"/> STOCK IN GSA CUSTOMER SUPPLY CENTERS <input type="checkbox"/> FOR SALE TO THE PUBLIC BY SUPERINTENDENT OF DOCUMENTS <input type="checkbox"/> NO COST DISTRIBUTION (Give address in item 46) <input type="checkbox"/> ACCOUNTABLE ITEM, RECORD ALL ISSUES OR SALES <input type="checkbox"/> OTHER (Explain in item 46) <input type="checkbox"/> LOCAL REPRODUCTION. Full size illustration of form available in: (Specify)		

► EXCEPTION USAGE

32. MANDATORY USE DATE (If applicable)	39. AGENCY FORM NUMBER(S) (If applicable)	40. ESTIMATED ANNUAL USAGE (No. forms) a. FIRST YEAR b. SUCCEEDING YEARS
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► ATTACHMENTS AND DESCRIPTION (X as applicable)

41. PRINTING SPECIFICATIONS: (Description of construction for which form used) <input type="checkbox"/> SF 1 (Pad or Cut Sheet) <input type="checkbox"/> SF 1C (Unit Set) <input type="checkbox"/> GPO 1026a (Marginally Punched) <input type="checkbox"/> GPO 2511 (Any construction - only for established GPO Printing Program) <input type="checkbox"/> OTHER (Specify) _____	42. ARTWORK AND GUIDES ATTACHED <input type="checkbox"/> PENCIL OR OTHER DRAFT <input type="checkbox"/> CAMERA COPY <input type="checkbox"/> OTHER (SPECIFY) _____ <input type="checkbox"/> DUMMY <input type="checkbox"/> SAMPLE
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► PROOFS

43. NUMBER OF PROOFS (X one) <input type="checkbox"/> NONE (Camera copy furnished) <input type="checkbox"/> 5	44. NUMBER OF DAYS PROOFS WILL BE HELD	45. SEND SPECIFIED NUMBER OF PRINTED FORM SAMPLES TO: a. 10 General Services Administration (KMAO) Washington, D.C. 20405 b. c.
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46. ADDITIONAL REMARKS: