

REQUEST FOR A BILL FOR COLLECTION

- **Note to Receivables and Collections:** Please create a billing document in FFIS using the following information.
- If a valid claims debt involves fire suppression costs, please create the billing as a refund to the P code assigned to the incident (BD/RF).

	ITEM	RESPONSE
1	Valid Claims Billing:	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>
2	Potential Claims Billing:	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>
3	Incident Location Code: (Enter 4 digit R/S/A, Unit)	0213
4	Debtor Information: Name of Debtor (Enter Last, First, MI) Address 1 Address 2 Address 3 City State Zip Code Is SSN or TIN available? If available, is the SSN or TIN in VEND? SSN or TIN	Durango and Silverton Narrow Gauge Railroad 479 Main Avenue Durango CO 81301-5494 Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Unknown <input checked="" type="checkbox"/> 99-9999999
5	Co-Debtors (Joint and Severally Liable)? If yes, go to Block 16, and enter the names and addresses of co-debtors.	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>
6	If Debt Becomes Delinquent: Assess interest? Use Late Payment Rate? Use Contract Disputes Act Rate? Use Superfund Interest Rate? **Assess administrative costs? Assess penalty charges?	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> **IF NO: I approve the waiver of the Admin. Charges on this bill request (these will be charged at a later date) <i>Amy Brandhuber</i> A. LISA LUX Branch Chief, Claims/Claims Officer Yes <input checked="" type="checkbox"/> No <input checked="" type="checkbox"/>
	If interest, administrative costs, and/or penalty charges will not be assessed, please explain why: Installment agreement paid in two equal installments of \$8,569.28 each, due on 4/30/2015 and 7/1/2015, per attached installment agreement.	

7	Total Principal Amount Owning:	Amount \$17,138.56
8	Principal Amount Owning by Job Code <i>(Note: If this is a valid claims debt and damages involve fire suppression costs, the job code should be the P code assigned to the incident):</i> Use the FY identifier for the year the fire occurred (i.e. P5594J 02). Job Code contact person for this bill: Ronald J. Duvall Phone: (970) 385-1265	Amount \$17,138.56 Job Code WBS Element:FS.EX.0213.P2.G9HJ
		Amount \$17,138.56 Job Code P2G9HJ15
		Amount \$ Job Code
		Amount \$ Job Code
9	Check should be mailed to:	ASC-Claims <input type="checkbox"/> ¹ Lockbox <input checked="" type="checkbox"/> Other <input type="checkbox"/> ² Address:

GENERAL INFORMATION REGARDING THE DEBT:

10	Are damages the result of a trespass?	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>
10a	Timber	Yes <input type="checkbox"/> No <input type="checkbox"/>
	ATSA Contract No. ³	
	Single Stumpage Value	
	Should double stumpage be assessed?	Yes <input type="checkbox"/> No <input type="checkbox"/>
	Should treble stumpage be assessed?	Yes <input type="checkbox"/> No <input type="checkbox"/>
10b	Other Forest Products: <i>(Enter mushrooms, wildings, etc.)</i>	
	ATSA Contract No. ⁴	
	Total Damages	
10c	Fire:	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>
	Name of Fire	Goblin Fire
	Total Suppression Costs	\$ 17,138.56
	Total Resource Damages	\$ 0
	Total Rehab work	\$ 0

10d	Occupancy:	
	Type of Occupancy Trespass	
	Total Damages	\$
10e	Archeological:	

¹ Check should be made payable to the "USDA Forest Service" and mailed, along with the billing, to the ASC, ATTN: Claims Unit Collection Officer, 101B Sun Ave., NE, Albuquerque, NM 87109.

² Enter appropriate check mailing address if other than the ASC or Lockbox.

³ Claims Specialist – Before completing this block, request the Unit's timber staff to create a contract in Timber Information Manager (TIM) and to provide the timber contract number to the Claims Specialist. This information must be obtained before requesting Receivables and Collections to create a billing document in FFIS.

⁴ Claims Specialist – Before completing this block, request the Unit's timber staff to create a contract in Timber Information Manager (TIM) and to provide the contract number back to the Claims Specialist. This information must be obtained before requesting Receivables and Collections to create a billing document in FFIS.

		Total Damages	
10f	Other Trespass:	Type of Trespass	
		Total Damages	\$
11	Are Damages the Result of a Tort (Other than Trespass):	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>	
11a	Motor Vehicle Damage:	Vehicle No.	
		Type of Vehicle	WCF <input type="checkbox"/> GSA <input type="checkbox"/>
		Total Damages	\$
		Is vehicle repairable?	Yes <input type="checkbox"/> No <input type="checkbox"/>
		Salvage Value	\$
11b	Other Government Property:	Type of Property	
		Total Damages	\$
12	CERCLA (Hazardous waste cleanup):	Enter name of cleanup site	
		Total Damages	\$
13	Petroleum Spill	Total Damages	\$
14	Other – Not Identified Above:	Item	
		Total Damages	\$
		Item	
		Total Damages	\$
		Item	
		Total Damages	\$
15	Information to Enter in ARTX (NOTE: This block must always be completed):	Direct costs incurred by the FS for suppression of the Goblin Fire, which occurred on the San Juan National Forest on October 6, 2012, as the result of sparks emitted by Durango & Silverton Narrow Gauge Railroad.	
16	Additional Information:	Debt to be paid via Installment Agreement, paid in two equal installments of \$8,569.28 each, due on 4/30/2015 and 7/1/2015, per attached signed agreement.	
DATE:		February 25, 2015	
CLAIMS SPECIALIST:		Joi Lin Olsen	

PHONE:	801-725-9013
CIS CONTROL NO.:	2013020008-001