CERTIFICATE OF AUTHORIZATION FOR ENVIRONMENTAL DIFFERENTIAL PAY

(The proponent is NGB-ARC-FT)

NAME:	SSAN:	UNIT AND LOCATION:

I certify below that this employee was exposed to the following hazard, physical hardship, or working condition category(ies) for the duration indicated, incidental to performing his assigned duties and is, therefore, authorized environmental differential pay in accordance with Subchapter S8-7 and Appendix J of FPM Supplement 532-1.

CAT EXPO	DATE	FROM	TO	TOTAL HOURS	SIGNATURE AND TITLE OF AUTHORIZING OFFICER

FOR PAYROLL USE ONLY

SUMMARY OF ENVIRONMENTAL DIFFERENTIAL PAY HOURS

CATEGORY I

RATE	CODE	HOURS
100%	A	_____
25%	B	_____
15%	C	_____
4%	D	_____

CATEGORY II

RATE	CODE	HOURS
50%	M	_____
8%	N	_____
4%	0	_____