

## EVALUATION OF TRANSPORTATION COST FACTORS

*(See Instructions on back before completion.)*

|  |                               |  |                         |
|--|-------------------------------|--|-------------------------|
| <b>1. PR, PD OR MIPR NUMBER</b>  | <b>2. SOLICITATION NUMBER</b> | <b>3. BID OPENING OR PROPOSAL CLOSING DATE</b> | <b>4. DATE REQUIRED</b> |
| <b>5. FMS</b> ( <i>X one</i> )<br><input type="checkbox"/> YES <input type="checkbox"/> NO | <b>6. UFC</b>                 |  | <b>7. NMFC</b>          |

### TRANSPORTATION DATA

| NAME OF COMPETITOR<br><b>A</b> | ITEM NO.<br><b>B</b> | F<br>M<br>S<br><b>C</b> | ORIGIN<br><b>D</b> | DESTINATION<br><b>E</b> | NO. OF SHIPMENTS<br><b>F</b> | QUAN- TITY<br><b>G</b> | NUMBER OF UNITS PER CONTAINER<br><b>H</b> | WEIGHT OF EACH CONTAINER<br><i>(Lbs.)</i><br><b>I</b> | SIZE OF CONTAINER IN INCHES<br><i>(LWH)</i><br><b>J</b> | GROSS SHIPPING WEIGHT<br><b>K</b> | MODE<br><b>L</b> | RATE PER CWT OR | TOTAL COST OF TRANSPORTATION<br><b>N</b> |
|--------------------------------|----------------------|-------------------------|--------------------|-------------------------|------------------------------|------------------------|---|---|---|-----------------------------------|------------------|-----------------|--|
|                                |                      |                         |                    |                         |                              |                        |   |   |   |                                   |                  | <b>M</b>        |  |
|                                |                      |                         |                    |                         |                              |                        |   |   |   |                                   |                  |                 |  |
|                                |                      |                         |                    |                         |                              |                        |   |   |   |                                   |                  |                 |  |
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|   |                                     |   |                                     |
|---|-------------------------------------|---|-------------------------------------|
| <b>8. BUYER/NEGOTIATOR</b>                                      |                                     | <b>10. TENDER/TARIFF</b>  |                                     |
| a. NAME ( <i>Last, First, Middle Initial</i> )                  | b. SYMBOL/EXT.                      |   |                                     |
| <b>9. CONTRACTING OFFICER</b>                                   |                                     | <b>11. TRANSPORTATION OFFICER</b>                               |                                     |
| a. TYPED OR PRINTED NAME ( <i>Last, First, Middle Initial</i> ) | b. SYMBOL/EXT.                      | a. TYPED OR PRINTED NAME ( <i>Last, First, Middle Initial</i> ) | b. SYMBOL/EXT.                      |
| c. SIGNATURE  | d. DATE SIGNED<br><i>(YYYYMMDD)</i> | c. SIGNATURE  | d. DATE SIGNED<br><i>(YYYYMMDD)</i> |

**INSTRUCTIONS FOR PREPARATION OF DD FORM 1654**

In order to facilitate processing the "Evaluation of Transportation Cost Factors," DD Form 1654 should be prepared in duplicate by the Contracting Officer, Buyer, or Negotiator and submitted to the Transportation Officer with the following information in Items 1 through 5, 8 and 9, and columns A through K.

| <b><u>ITEM NUMBER</u></b> | <b><u>REQUIREMENT</u></b>   | <b><u>ITEM NUMBER</u></b> | <b><u>REQUIREMENT</u></b>   |
|---------------------------|---|---------------------------|---|
| 1.                        | PR, PD, or MIPR Number.   | E.                        | Destination - City, State and Zip Code, or Military Installation and Zip Code.  |
| 2.                        | Solicitation Number.  | F.                        | Number of Shipments.  |
| 3.                        | Bid Opening or Proposal Closing Date <i>(only required on first page if multiple pages used)</i> .      | G.                        | Quantity - to be shipped each shipment.   |
| 4.                        | Date the DD Form 1654 is required by the C.O., Buyer or Negotiator - allow a minimum of 5 working days. | H, I, J, K.               | Units, weight, size, and gross weight when known.   |
| 5.                        | FMS - Mark (X) Yes or No. If Yes, identify each FMS portion in Column C with an X.                      | L.                        | Insert Mode of Shipment Code(s) from DoD 4500.32-R (MILSTAMP) appendix B.<br><i>(To be provided by Transportation Officer.)</i>   |
| 6.                        | UFC - Uniform Freight Class.<br><i>(To be provided by Transportation Officer.)</i>                      | M.                        | Freight rate to be specified as per CWT, gallon, vehicle used, mile, ton or whatever unit of measure rate is based.<br><i>(To be provided by Transportation Officer.)</i> |
| 7.                        | NMFC - National Motor Freight Class.<br><i>(To be provided by Transportation Officer.)</i>              | N.                        | To be provided by Transportation Officer.   |
| A.                        | Name of Competitor - to be provided in ascending order by price.  | 8 and 9.                  | Self explanatory. <i>(Items 8 and 9 shall be completed only on first page if multiple pages are used.)</i>  |
| B.                        | Item Number.  | 10.                       | Tariff Authority from which rates are obtained<br><i>(To be provided by Transportation Officer.)</i>  |
| C.                        | Insert an "X" for each FMS increment.   | 11.                       | Self explanatory.   |
| D.                        | Origin - City, State and Zip Code.  |                           |   |