

CHAPTEE 12

THE DO-IT-YOURSELF (DITY) PROGRAM

12000. General.

a. The DITY Program is the only method of transporting Department of Defense personal property at Government expense which is not managed by the Military Traffic Management Command (**MTMC**). The program, which is available for military members **only**, is managed individually by each military service for the convenience of their members.

b. When authorized in advance by the origin transportation office, **the** program affords members on PCS, retirement, separation, or TDY orders, the opportunity and convenience of being able to pack, load, and move their personal property according to their personal desires while qualifying for a monetary incentive. The incentive is based on 80 percent of what it would have cost the Government to move the same property, less actual expenses and applicable taxes.

12001. Authorization.

a. While the basic DITY entitlement is outlined in JFTR, paragraph U5320-E, program guidance for each Service has been incorporated into their respective personal property regulations which are to be consulted by counselors according to the Service affiliation of their customers.

Air Force:	AFR 75-25
Army:	AR 55-71, Chapter 14
Navy:	NAVSUP 490, Chapter 13
Marine Corps:	MCO P4600.7C, Chapter 2, Part I

b. The program in its present form has been in existence since 1987 (specific dates vary depending on the military service concerned) and its popularity has grown steadily since that time.

c. A DITY move counseling checklist is at Figure 12-1.

APPLICATION FOR DO IT YOURSELF MOVE AND COUNSELING CHECKLIST <small>(Please read Privacy Act Statement on reverse before completing form.)</small>				1. DATE PREPARED (YYMMDD)	2. SHIPMENT NUMBER
MEMBER OR EMPLOYEE INFORMATION					
a. NAME (Last, First, Middle Initial)		b. RANK / GRADE	c. SOCIAL SECURITY NO.	d. AGENCY	
THIS SHIPMENT / STORAGE IS REQUIRED INCIDENT TO THE FOLLOWING ORDERS					
TYPE ORDERS (X one)		b. DATE OF ORDERS (YYMMDD)	c. ISSUED BY		
<input type="checkbox"/> LaAL <input type="checkbox"/> PERMANENT <input type="checkbox"/> TEMPORARY		d. NEW DUTY ASSIGNMENT	e. ORDERS NO.	f. NUMBER MILES	
NAME OF PREPARING OFFICE			h. PAYING (AFO/FAAO) NAVY AND MARINE CORPS (See reverse)		
i. SEND CHECK TO (Complete address)				j. STATE OF LEGAL RESIDENCE	
ENTITLEMENTS (X and complete as applicable)			g. MEMBER RESPONSIBILITY (X and complete as applicable)		
a. Option of GBL (Van) and/or DITY move (nontemporary storage).			a. Operating allowance (Amount)		
b. DITY move authorized from to			b. Pick up rental vehicle and ensure safe operation. Pick up date (YYMMDD)		
c. TMO / TMO provided with accurate estimate weight of HHGs.			c. Empty/loaded weight tickets required for each trip made. Use government, public, commercial scales.		
d. Maximum authorized weight.			d. Name, rank, Social Security Number, Weighmaster's signature required on each weight ticket.		
e. Unauthorized items (POVs, boats, flammables, etc.).			e. Trailers weighted attached to prime mover (no passengers aboard - weigh entire unit at same time).		
f. Power of Attorney, if required.			f. DITY moves require DD Form 1361-2.		
g. Type of vehicle authorized (POV).			g. DD Form 2278 and weight tickets must be submitted to paying office / TMO / TFO to receive incentive payment. Provide Rental Contract (not required for Air Force and Army).		
h. Loss or damage - maximum government liability					
i. Temporary storage.					
COST COMPUTATION					
ESTIMATED CONSTRUCTIVE COSTS			b. PAID BY DSSN		
(1) MTMC rate solicitations per cwt X plus \$5.00 X est. wt. or wt. allow		\$	c. VOUCHER NO.		d. DATE
(2) Local rate per cwt X est. wt. or wt. allow		\$	e. I agree to furnish two weight tickets within 45 days from the start of this move. If I fail to do so, I voluntarily consent to collection of all government costs of this move from my pay. I also voluntarily consent to collection of any unearned advance operating allowance up to a maximum of \$ _____ from my pay.		
(3) Estimated gross incentive		\$			
(4) Advance operating allowance		\$			
NO INCENTIVES WILL BE PAID WITHOUT ACCEPTABLE WEIGHT TICKETS AND OTHER REQUIRED DOCUMENTS					
10. I CERTIFY THAT I HAVE READ AND UNDERSTAND MY RESPONSIBILITIES AND CONDITIONS PRINTED ON THE REVERSE SIDE OF THIS FORM					
a. SIGNATURE OF MEMBER / AGENT		b. DATE SIGNED	c. SIGNATURE OF COUNSELOR		d. DATE SIGNED
11. CERTIFICATION OF TMO / TFO					
a. ACTUAL CONSTRUCTIVE COSTS					
(1) <small>(if expense plus \$5.00)</small> actual wt. allow			(2) <small>local rate per cwt</small> actual wt. allow		
\$			\$		
b. CONSTRUCTIVE COSTS OF _____ GBL OR _____ LOCAL MOVES					
<small>(Attach copies of acceptable tare and gross tickets.)</small>					
12. TMO					
a. TYPED OR PRINTED NAME		b. SIGNATURE		c. DATE SIGNED	

DD Form 2278, DEC 87

Replaces AF 417, May 82, and previous editions of DD 2278, which are obsolete,

Date _____

(figure 1 2-1)

PRIVACY ACT STATEMENT

AUTHORITY: Title 37, US Code 406, Title 5 US Code 5726, and EO 9397, November 1943 (SSN).

PRINCIPALPURPOSE: This DD Form is used as a checklist for shipment of personal property under the Do-It-Yourself program for military members.

ROUTINEUSES: To ensure complete and proper consoling under the program and determining if an incentive is appropriate. This information is used by the finance offices in cases of excess cost collections. Information on this form and on the approved weight tickets is released to military finance/paying offices. The social Security Number is used to substantiate claim for incentive payment under the Do-It-Yourself program. Information may be disclosed to any federal agency responsible for making such determination or reviewing such claims. Information may also be disclosed to federal agencies in the performance of audits, in the investigation of suspected fraud, and in criminal prosecution for fraud.

DISCLOSURE: Voluntary; however, if information is not furnished, personal property cannot be moved under the Do-It-Yourself program.

MEMBER RESPONSIBILITY

1. This shipment/storage 101 consists of my property or the property awarded to my ex-spouse incident to divorce which was acquired by me prior to the effective date of my orders.
2. If my orders are modified or cancelled and affect this shipment, I will immediately notify the shipping office at point of origin (or port, if any) and destination.
3. I will remit proper amount or consent to the collection from my pay as may be necessary to cover all excess costs occasioned by this shipment.
4. I agree to furnish weight tickets within 45 days of the start of the move to preclude issuance of DD Form 139 for collection of all charges paid by the government.

5. I understand the government will not be responsible for goods remaining in storage after the expiration of the authorized period.
6. Incentives will be paid by:

NAVY — Forward documents to:
Commanding officer
Navy Material Transportation Office
Code 024, Bldg 2.1133-5, Naval Base
Norfolk, VA 2351 1-6691

MARINE CORPS — Forward documents to:
Commanding General
470 MCLB
Albany, GA31704-SO00

CERTIFICATION BY MEMBER

I certify that I completed my shipment under the Do-It-Yourself program and that my shipment consisted of household goods and personal effects that were authorized to be moved at Government expense. These goods belonged to me and were used by myself (or family) before the effective date of change of station orders. I also certify that I have not received previous payments relating to this move (excluding operating or mileage monetary in lieu of transportation for dependents).

DD Form 2278, DEC 87

Date _____

(figure 12-1 reverse side)