## NATIONAL INTERAGENCY FIRE CENTER CASUAL PAYMENT CENTER 3833 S DEVELOPMENT AVE BOISE, ID 83705-5354 PHONE: 877-471-2262 FAX: 208-433-6405 EMAIL: CASUALPAY@BLM.GOV

## **ECI REQUEST FORM**

Please provide or create ECIs for the following individuals:

Hired At	Casual Name (First, Middle, Last)	ECI (CPC Use Only)	SSN
			1

Please note: ECIs may be different in length. Although the ECI field allows up to 10-digits, they each have leading zeroes which are not required. Please indicate the piece of the ECI indicated above only when submitting OF-288s for casuals.

Requestor:

□Email to:

Approving Official Signature:

Privacy Act Statement: Information on this form is collected under the authority of the Administratively Determined (AD) Pay Plan. Information collected via this form is covered by the Privacy Act of 1974 and Privacy Act System of Records Notice DOI-85. The primary use of this information is to start, stop, or change entitlements and to process any voluntary or involuntary deductions on pay and leave issues. The information you furnish will be used to identify records properly associated with you, to obtain additional information to update your record, if necessary, and to determine any present or future entitlement. Disclosure may be made only to authorized persons according to Title 5 USC 552a and for uses described in System of Records Notices DOI-85. Submission of the information in this form is voluntary; however, requests will not be completed without the information needed to process the request

Revised 01/2024.









