

MILPERSMAN 1306-300

OVERSEAS TOUR EXTENSION INCENTIVES PROGRAM (OTEIP)

Responsible Office	NAVPERSCOM (PERS-40CC)	Phone:	DSN COM FAX	882-3550 (901) 874-3550 882-2647
NAVPERSCOM CUSTOMER SERVICE CENTER		Phone: Toll Free	1-866-U ASK NPC	

References	(a) 10 U.S.C. §705 (b) 37 U.S.C. §314 (c) DoD 7000.14-R, Financial Management Regulations, Volume 7A, Military Pay Policy-Active Duty and Reserve Pay, September 2013 (d) NAVSO P-6034, Joint Federal Travel Regulations (JFTR), Volume 1, Uniformed Service Members, Chapter 7, Part J, Section U7305 (e) OPNAVINST 4650.15B (f) Navy DJMS Procedures Training Guide, Chapter 14
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1. **Policy.** Overseas Tour Extension Incentives Program (OTEIP) offers eligible enlisted members the opportunity to choose one of four incentive options for an extension of the Department of Defense (DoD) overseas tour length of 12 months or more.

a. The following options are available:

(1) **Option A** - \$80 per month special pay for each month during the period of the extension.

(2) **Option B** - 30 days rest and recuperation rest and relaxation (R&R) absence during the period of extension.

(3) **Option C** - 15 days R&R absence, plus round trip transportation at Government expense from the location of the extended tour of duty to the port of debarkation in **continental United States (CONUS)** and return during the period of extension. Members authorized OTEIP extensions longer than 12 months are entitled to receive 20 days R&R absence.

(4) **Option D** - \$2,000 lump sum payment on the first day of the 12-month extension.

b. The elected OTEIP option may not be effected prior to the projected rotation date (PRD) extension becoming operative.

c. An extension overseas required for command sponsorship of family member(s) will not be used as an extension for eligibility under this program.

d. The authority and guidance for the OTEIP incentives are contained in references (a) through (f).

e. A request for extension in an overseas area need not be for the same command. An extension of at least 12 months may be granted for a new command or permanent duty station (PDS), if the new assignment satisfies the prescribed DoD tour length at the new activity. This exception is only used in conjunction with a decommissioning or billet reduction when a member is not being reassigned for a full DoD tour. In these circumstances, the extension must be for a minimum of 12 months, or the unaccompanied tour length at the new area, whichever is greater.

f. Incentive options may not be granted without receipt of approval authorization from Navy Personnel Command (NAVPERSCOM), Entitlements Program Manager (PERS-40CC).

g. Consecutive overseas tour (COT) leave entitlement is earned when a member is assigned to back-to-back complete DoD tours. OTEIP is earned for extensions of at least 12 months beyond the current DoD tour.

NOTE: Upon receipt of the OTEIP authorization message, command should retain one copy in member's command career counselor folder, provide a copy to member, and ensure the supporting personnel support detachment (PERSUPP DET) or personnel office (PERSOFF) receives a copy with the appropriate NAVPERS 1070/613 Administrative Remarks as described in paragraph 6, below.

2. **Eligible Members.** The following enlisted members are eligible for OTEIP:

a. Members serving overseas on Type "3", "4", or "6" duty and members serving in Hawaii on Type "2" duty. Personnel must complete the prescribed DoD area tour (accompanied for those

taking family member(s), unaccompanied for those who do not take family member(s)) before being eligible for OTEIP.

b. Members serving outside these areas on temporary additional duty (TEMADD) in excess of 179 days during any 12-month period will not be eligible for OTEIP.

c. A member assigned to a family member-restricted tour location who extends for a minimum of 12 months beyond the prescribed DoD tour length, may elect either the OTEIP or COT leave travel entitlement, not both.

3. **OTEIP Benefits for First-Termers.** First-term members assigned to an overseas PDS will be eligible for OTEIP following completion of the prescribed DoD area tour (accompanied tour length for those with command sponsored family member(s) on station, and an all others tour length for single Sailors or those with family member(s) electing to serve an unaccompanied tour). This policy is modified to include all members whose assigned tour exceeds the DoD tour length by at least 12 months. Hence, a single member assigned to Type "4" duty in Japan for a 36-month sea tour where the DoD unaccompanied and all others tour is 24 months, would be OTEIP eligible for the third year. OTEIP benefits, in this case, are not automatic and must be requested.

4. **Request Procedures.** Submit requests for voluntary extensions of 12 or more months to NAVPERSCOM (PERS-40CC), not more than 18 months or less than 9 months, prior to current PRD.

a. The preferred method of submission is via the BUPERS ONLINE (BOL) OTEIP Program.

b. Commands without BOL OTEIP Program capability may submit requests via BOL Personnel Action Request (PAR), NAVPERS 1306/7 Enlisted Personnel Action Request, naval message (Exhibit 1), or letter signed by commanding officer (CO) or delegated signing authority. NAVPERS 1306/7 may be accessed via the following link: <http://www.public.navy.mil/bupers-npc/reference/forms/NAVPERS/Documents/NAVPERS%201306-7.pdf>.

c. Processing times using BOL PAR, NAVPERS 1306/7, naval message, or letter are greater than with the BOL OTEIP Program. Use one method of submission and do not resubmit requests,

unless a request is verified as not received by NAVPERSCOM (PERS-40CC).

d. Requests submitted via BOL PAR, NAVPERS 1306/7, naval message, or letter must include the following:

(1) Recommendation by the command.

(2) The specific time frame of the requested extension period or the specific time frame of OTEIP eligibility, if requesting OTEIP benefits when no PRD adjustment is needed.

(3) Member's elected option (A, B, C, or D).

5. **Approval Factors.** Approval of OTEIP requests will be based on the following factors:

a. Current manning and priorities (needs of the Navy);

b. Need for the member at a Type "2" or "4" unit (shipboard duty), if on Type "3" duty;

c. Status of relief;

d. Timeliness of request (submission cannot be more than 18 months or less than 9 months prior to PRD); and

e. Need for member at a Chief of Naval Operations (CNO) priority billet (i.e., instructor, recruiter).

6. **Approval by NAVPERSCOM:**

a. **Personnel Approved for Incentive Option A**

(1) The command shall:

(a) Prepare the following NAVPERS 1070/613 utilizing Navy Standard Integrated Personnel System (NSIPS). Complete the NAVPERS 1070/613 panel as follows:

Authority: MILPERSMAN 1306-300

Permanent: Yes

Date: Select Date Prepared

Subject: OVERSEAS TOUR EXTENSION INCENTIVE - OPTION A

Remarks: As authorized by MILPERSMAN 1306-300, I desire to exercise incentive Option A for my overseas extension of ____ months for the period ____ - ____.

Approving Officer Signature: (Signature of commanding officer or designee with "by direction" authority).

Witness Signature: Enter the name and title of the witness in the appropriate blocks followed by the date the member and witness will sign the NAVPERS 1070/613.

Member Signature: Select the date the member will sign.

(b) Print NAVPERS 1070/613, obtain the member and witness signatures, and submit it with a copy of the OTEIP authorization message to the servicing PERSUPP DET or PERSOFF.

(2) The PERSUPP DET or PERSOFF shall:

(a) Verify the NSIPS NAVPERS 1070/613 Administrative Remarks entry and submit the NAVPERS 1070/613 to the Official Military Personnel File (OMPF).

(b) Authorize the OTEIP payment per reference (f).

b. Personnel Approved for Incentive Option B

(1) The command shall:

(a) Authorize R&R absence and complete the NSIPS Administrative Remarks panel as follows:

Authority: MILPERSMAN 1306-300

Permanent: Yes

Date: Select Date Prepared

Subject: OVERSEAS TOUR EXTENSION INCENTIVE - OPTION B

Remarks: As authorized by MILPERSMAN 1306-300, I desire to exercise incentive Option B for my overseas extension of _____ months for the period _____ - _____.

Approving Officer Signature: (Signature of commanding officer or designee with "by direction" authority).

Witness Signature: Enter the name and title of the witness in the appropriate blocks followed by the date the member and witness will sign the NAVPERS 1070/613.

Member Signature: Select the date the member will sign.

(b) Print NAVPERS 1070/613, obtain the member and witness signatures, and submit it with a copy of the OTEIP authorization message to the servicing PERSUPP DET or PERSOFF.

(2) The PERSUPP DET or PERSOFF shall verify the NSIPS Administrative Remarks entry and submit the NAVPERS 1070/613 to the OMPF.

NOTE: Option B must be used during operative period of extension and may not be used in conjunction with permanent change of station transfer or separation leave.

c. **Personnel Authorized Incentive Option C.** The accounting data in the NAVPERSCOM OTEIP approval message will be provided to personnel authorized incentive Option C. In order to allow local administrative support personnel sufficient processing time, change requests to Option C should be submitted via BOL PAR, NAVPERS 1306/7, letter, or naval message to NAVPERSCOM (PERS-40CC), not less than 30 days prior to the proposed commencement of travel. Travel for members serving in Type "4"

units electing incentive Option C will originate from and return to the unit's homeport.

(1) The command shall:

(a) Authorize R&R absence, plus round trip transportation at Government expense from the location of the extended tour of duty to the CONUS port of debarkation and return during the period of extension;

(b) Complete the NSIPS Administrative Remarks panel as follows:

Authority: MILPERSMAN 1306-300

Permanent: Yes

Date: Select Date Prepared

Subject: OVERSEAS TOUR EXTENSION INCENTIVE - OPTION C

Remarks: As authorized by MILPERSMAN 1306-300, I desire to exercise incentive Option C for my overseas extension of ____ months for the period ____-____. I plan to travel during the period ____ - _____. I understand that no per diem, meals, or lodging are authorized in connection with this travel and that no transportation or per diem has been authorized for family member(s).

Approving Officer Signature: (Signature of commanding officer or designee with "by direction" authority).

Witness Signature: Enter the name and title of the witness in the appropriate blocks followed by the date the member and witness will sign the NAVPERS 1070/613.

Member Signature: Select the date the member will sign.

(c) Print NAVPERS 1070/613, obtain the member and witness signatures, and submit it along with a copy of the OTEIP authorization message to the servicing PERSUPP DET or PERSOFF.

(d) Upon receipt of the accounting data, the local command will prepare the necessary travel orders citing the authority for R&R absence as MILPERSMAN 1306-300.

(e) TEMADD orders will reflect, "Travel by Government air is directed where available; otherwise, commercial air authorized as arranged by a Navy Passenger Transportation Office (NAVPTO) or other designated direct port-call activity."

(f) Leave will commence and terminate at the appropriate CONUS port of debarkation and embarkation. Free baggage allowance is two pieces of checked baggage (each piece not to exceed 62 linear inches or 70 pounds) and one "carry-on" bag (not to exceed 45 linear inches). No excess baggage is authorized.

(g) Return transportation should be arranged prior to departure of the member from the overseas location. This may be accomplished by the overseas NAVPTO or other designated direct port-call activity.

(2) The member is entitled to transportation from the location of the extended tour of duty to the nearest port of embarkation providing travel to the United States (U.S.), then to the nearest port of debarkation in the U.S. and return.

(3) The PERSUPP DET or PERSOFF shall verify the NSIPS Administrative Remarks entry and submit the NAVPERS 1070/613 to the OMPF.

d. Personnel Approved for Incentive Option D

(1) The command shall:

(a) Complete the NSIPS Administrative Remarks panel as follows:

Authority: MILPERSMAN 1306-300

Permanent: Yes

Date: Select Date Prepared

Subject: OVERSEAS TOUR EXTENSION INCENTIVE - OPTION D

Remarks: As authorized by MILPERSMAN 1306-300, I desire to exercise incentive Option D payment for my overseas extension of _____ months for the period _____-_____. I understand that if I fail to fully complete the 12-month overseas extension, the Government is authorized to recoup the unearned pro rata portion of the lump sum payment.

Approving Officer Signature: (Signature of commanding officer or designee with "by direction" authority).

Witness Signature: Enter the name and title of the witness in the appropriate blocks followed by the date the member and witness will sign the NAVPERS 1070/613.

Member Signature: Select the date the member will sign.

(b) Print NAVPERS 1070/613, obtain the member and witness signatures, and submit it along with a copy of the OTEIP authorization message to the servicing PERSUPP DET or PERSOFF.

(2) The PERSUPP DET or PERSOFF shall:

(a) Verify the NSIPS Administrative Remarks entry and submit the NAVPERS 1070/613 to the OMPF.

(b) Authorize the OTEIP payment per reference (f).

7. **Changing of Incentive Options.** When member is unable to take advantage of the originally elected option due to operations, schedules, or personal preference; take the following actions.

a. The command shall:

(1) Complete the NSIPS Administrative Remarks panel as follows:

Authority: MILPERSMAN 1306-300
Permanent: Yes
Date: Select Date Prepared
Remarks: As authorized by MILPERSMAN 1306-300, I desire to change my previously elected OTEIP option from ____ to _____. I certify that I have neither received, nor executed any portion of my previously elected option for the period of extension _____ to _____.
Member authorized change of option from ____ to ____ for period of extension from _____ to _____.
Approving Officer Signature: Enter the name and title of the approving officer (must be the CO or designee with "by direction" authority) in the appropriate blocks followed by the date the member and approving officer will sign the NAVPERS 1070/613.
Witness Signature: Enter the name and title of the witness in the appropriate blocks followed by the date the member and witness will sign the NAVPERS 1070/613.
Member Signature: Select the date the member will sign.

(2) Print NAVPERS 1070/613, obtain the member and witness signatures, and submit it with a copy of the OTEIP authorization message to the servicing PERSUPP DET or PERSOFF.

(3) Submit OTEIP change requests to NAVPERSCOM (PERS-40CC) via BOL PAR, NAVPERS 1306/7, naval message, or letter signed by CO or delegated signature authority. Option change requests must indicate which option member was previously authorized, time frame of the previously authorized OTEIP period as verified by NAVPERSCOM authorization message, which OTEIP option member now desires, and the affirmative statement

certifying that the member has not received or executed any portion of the previously authorized OTEIP benefits.

NOTE: BOL OTEIP Program should not be used to request OTEIP option changes.

b. The PERSUPP DET or PERSOFF shall verify the NSIPS Administrative Remarks entry and submit the NAVPERS 1070/613 to the OMPF.

8. Canceling Extensions

a. Cancellation requests may be submitted via BOL PAR, NAVPERS 1306/7, or letter to NAVPERSCOM (PERS-40CC). Cancellation requests must include a justification statement about whether or not the member has used any portion of the OTEIP benefits and a recommendation about whether or not a gap in the billet is acceptable.

b. Members who elect Option D and do not complete the 12-month extension shall refund to the Government a pro rata recoupment of the unearned portion of the benefits. Secretary of the Navy may waive the obligation of a member to reimburse the Navy, if he or she determines that circumstances warrant the waiver.

(1) Waiver requests may be submitted to NAVPERSCOM (PERS-40CC) via BOL PAR, NAVPERS 1306/7, naval message, or letter signed by CO or delegated signature authority.

(2) Waiver requests must include justification.

c. Every effort must be made to ensure the member uses the entitled incentive option during the operative period of extension.

(1) Incentive options involving R&R absence cannot be authorized retroactively.

(2) Retroactive monetary entitlements are payable only with authorization from NAVPERSCOM (PERS-40CC).

(3) Requests for retroactive payment must include the reason why the option was not requested or used during the eligibility period of extension.

(4) The command shall:

(a) Complete the NSIPS Administrative Remarks panel as follows:

Authority: MILPERSMAN 1306-300

Permanent: Yes

Date: Select Date Prepared

Remarks: I acknowledge that I have received no benefits for the period _____ - _____ under the Overseas Tour Extension Incentives Program (OTEIP).

Approving Officer: (Signature of commanding officer or designee with "by direction" authority).

Witness Signature: Enter the name and title of the witness in the appropriate blocks followed by the date the member and witness will sign the NAVPERS 1070/613.

Member Signature: Select the date the member will sign.

(b) Print NAVPERS 1070/613, obtain the member and witness signatures, and submit it to the servicing PERSUPP DET or PERSOFF.

(5) The PERSUPP DET or PERSOFF shall verify the NSIPS Administrative Remarks entry and submit the NAVPERS 1070/613 to the OMPF.

EXHIBIT 1

OVERSEAS TOUR EXTENSION INCENTIVES PROGRAM (OTEIP)
MESSAGE FORMAT REQUEST
(Use proper message format.)

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R DDHMMZ MMM YY ZYB
FM
TO COMNAVPERSCOM MILLINGTON TN//PERS-40CC//

BT
UNCLAS //N01306//
MSGID/GENADMIN/ /-/MMM//
SUBJ/OVERSEAS TOUR EXTENSION INCENTIVES PROGRAM (OTEIP)//
REF/A/DOC/CNPC//
AMPN/REF A IS MILPERSMAN ARTICLE 1306-300//
POC/NAME/RATE OR RANK/TITLE/TEL: /E-Mail address//
Mandatory (NOTE 1)
RMKS/1. REQUEST OTEIP FOR THE FOLLOWING SERVICE MEMBER:
A. NAME/RATE:
B. SSN: (last four only)
C. COMMAND UIC:
D. EXTENSION PERIOD: (NOTE 2)
E. OTEIP OPTION:
F. COMMANDING OFFICER'S RECOMMENDATION:
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NOTE 1: Point of contact line is mandatory. List e-mail address if possible.

NOTE 2: For extension period, enter dates of extension (e.g., JUL09-JUL10), or indicate the period of eligibility if requesting OTEIP benefits when no PRD adjustment is necessary.