

MILPERSMAN 1306-300

OVERSEAS TOUR EXTENSION INCENTIVES PROGRAM (OTEIP)

Responsible Office	NAVPERSCOM (PERS-40CC)	Phone:	DSN COM FAX	882-3550/3502 (901) 874-3550/3502 882-2647
MyNavy Career Center		Phone: Toll Free	1-833-330-MNCC (6622)	
		E-mail:	askmncc@navy.mil	
		MyNavy Portal:	https://my.navy.mil/	

References	(a) 10 U.S. Code §705 (b) 37 U.S. Code §314 (c) DoD Instruction 1315.18 of October 28, 2015 (d) Joint Travel Regulations par. 7005 (e) OPNAV Instruction 4650.15B of 15 Dec 2011 (f) DFAS - DJMS Procedures Training Guide, Chapter 14 (g) Military Pay Advisory (MPA) 29/14
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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 (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 the **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 used prior to the extension period reflected on the NAVPERSCOM authorization message or prior to member obtaining sufficient obligated service.

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 (g).

e. A request for extension in an overseas area need not be for the same command.

(1) 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.

(2) 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.

(3) 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), OTEIP 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, the 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 Alaska and Hawaii on Type "2" duty. Personnel must complete the prescribed DoD area tour (accompanied for those taking dependents, unaccompanied for those who do not take dependents) 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 dependent-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.

a. Members must complete the accompanied tour length for those with command sponsored dependents on station, or the unaccompanied tour length for single Sailors without dependents, or the unaccompanied tour length for those with dependents electing to serve an unaccompanied tour.

b. A single member assigned to Type "4" duty for a 36-month sea tour in Japan where the DoD unaccompanied tour is 24 months would be OTEIP-eligible for the third year.

c. OTEIP benefits are not automatic and must be requested.

Note: This policy is modified to include all members whose assigned tour exceeds the DoD tour length by at least 12 months.

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 12 months, prior to current projected rotation date (PRD).

a. Commands may submit requests using **one** of the following methods:

(1) NAVPERS 1306/7 Enlisted Personnel Action Request, or letter signed by the commanding officer or delegated signature authority directly to the MyNavy Career Center (MNCC) at askmncc@navy.mil;

(2) or Naval message (exhibit 1).

b. Do not resubmit requests, unless a request is verified as not received by NAVPERSCOM (PERS-40CC).

c. Requests 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); and

(4) Location of dependents for those members with dependents whether serving accompanied or unaccompanied.

Note: Activities must allow 30 days processing time for OTEIP request before contacting cognizant detailer for status update.

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 should be at least 9 months, but not more than 18 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 Authorized Incentive Option A**

(1) The command must:

(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 signatures from the member and witness, and submit signed NAVPERS 1070/613 with a copy of the OTEIP authorization message to the servicing PERSUPP DET or PERSOFF.

(2) The PERSUPP DET or PERSOFF must:

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

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

b. **Personnel Authorized Incentive Option B**

(1) The command must:

(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 signatures from the member and witness, and submit signed NAVPERS 1070/613 with a copy of the OTEIP authorization message to the servicing PERSUPP DET or PERSOFF.

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

Note: Option B benefits may be taken during one period or incrementally at the CO's discretion. Benefits 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 to NAVPERSCOM by using one of the following methods: 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 must:

(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 dependents.

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 signatures from the member and witness, and submit signed NAVPERS 1070/613 with a copy of the OTEIP authorization message to the servicing PERSUPP DET or PERSOFF.

(d) Submit order request via NSIPS, and cite the authority for R&R absence as MILPERSMAN 1306-300 upon receipt of the accounting data.

(e) Confirm TEMADD orders 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) Ensure 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) Verify return transportation is 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 must verify the NSIPS Administrative Remarks entry and submit the NAVPERS 1070/613 to the OMPF.

d. Personnel Authorized Incentive Option D

(1) The command must:

(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 prorated 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 signatures from the member and witness, and submit signed NAVPERS 1070/613 with a copy of the OTEIP authorization message to the servicing PERSUPP DET or PERSOFF.

(2) The PERSUPP DET or PERSOFF must:

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

(b) Authorize the OTEIP payment per references (f) and (g).

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

a. The command must

(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 signatures from the member and witness, and submit signed NAVPERS 1070/613 with a copy of the OTEIP authorization message to the servicing PERSUPP DET or PERSOFF.

(3) Submit OTEIP change requests to NAVPERSCOM (PERS-40CC) using one of the following methods: 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 hasn't received or executed any portion of the previously authorized OTEIP benefits.

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

8. Canceling Extensions

a. Cancellation requests may be submitted using one of the following methods: BOL PAR, NAVPERS 1306/7, naval message, or letter to NAVPERSCOM (PERS-40CC). Cancellation requests must include reason for the cancellation request, affirmation certifying whether or not the member has used any portion of the OTEIP benefits, CO's recommendation, and indication on whether or not a gap in the billet is acceptable.

b. Members who elect Option D and do not complete the 12-month extension must refund to the Government a prorated 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) using one of the following methods: 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 must:

(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 must 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 DDHHMMZ MMM YY ZYB
FM
TO COMNAVPERSCOM MILLINGTON TN//PERS-40CC//

BT
UNCLAS //N01306//
MSGID/GENADMIN//
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:
G. INDICATE LOCATION OF DEPENDENTS OR N/A IF MEMBER HAS NO
DEPENDENTS
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BT
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Note 1: Point of contact line is mandatory. List the e-mail address if possible.

Note 2: For extension period, enter dates of extension (e.g., JUL16-JUL17), or indicate the period of eligibility if requesting OTEIP benefits when no PRD adjustment is necessary.