

# Authorized Boots for wear with the Navy Working

## Uniform Type III

Authorized as of: 1 October 2019. The list of boots has expanded and will continue to be updated as new boots are certified. See NAVADMIN 214/17 for the initial list of authorized boots.

**Optional Boots listed may require Commanding Officer guidance and authorization for wear**

### Black Leather Safety Boots

- A. Belleville Shoe Company, Style 490ST 'I-Boot 4' (Certificate Number 15B36-002471-250-88) Ashore/Shipboard (Unisex sizing)



- B. Bates Shoe Company, Style 1621 (Men) (Certificate Number 15B30-002034-101) Ashore/Shipboard



- C. Belleville Shoe Company, Style 360ST (Men) (Certificate Number 15B30-001999-101) Ashore/Shipboard



- D. Bates Shoe Company, Style 1788 (Women) (Certificate Number 15B30-002035-100) Ashore/Shipboard



- E. Belleville Shoe Company, Style F360ST (Women) (Certificate Number 15B30-02380-100-88) Ashore/Shipboard

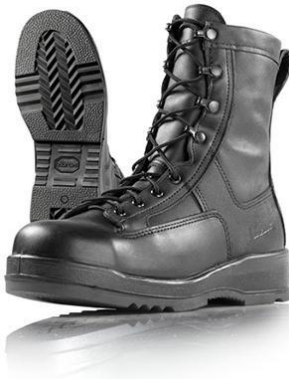


- F. Black Leather Safety Boots, Bates Shoe Company, Style E01200A (Certificate Number 15B27-002427-224) Ashore/Shipboard/Flight deck. (Unisex sizing)

G. Belleville Shoe Company Style 800ST (Certificate Number 15B27-002409-224) Ashore/Shipboard/Flight deck



H. Original Footwear, Style Altama 425101 (Certificate Number 15B27-002393-224) Ashore/Shipboard/Flight deck



I. Rocky Brands, Inc., Style 795B (Certificate Number 15B27-002383-224) Ashore/Shipboard/Flight deck

- J. Bates Shoe Company, Style EO1421 (Men) (Certificate Number 25B30-001984-101-81) Ashore/Shipboard



- K. Bates Shoe Company, Style EO1778 (Women) (Certificate Number 25B30-001985-100) Ashore/Shipboard



### **Black Non-Safety Boots**

- A. Rocky Brands, Inc., Style S2V 102. (unisex sizing) Ashore



B. Oakley Light Assault Boot 2, Product Code 11188-02E, Worn Ashore and in Non-Industrial environments



### **Coyote Brown Rough-Side-Out Non-Safety Boots**

A. Belleville Shoe Company, Style 533 (Certificate Number 25CY27-002371-225-01) Ashore



B. Rocky Brands, Inc., Style S2V 104 (Certificate Number 25CY27-002372-225-01) [Super fabric instep version] Ashore



- C. Rocky Brands, Inc., Style S2V 104-1 (Certificate Number 25CY27-002374-225-02) [Gore-Tex Lining, Super fabric instep version] Ashore



- D. Rocky Brands, Inc., Style RKCO50 (Certificate Number 25CY27-002424-225-01) [Leather instep version] Ashore



- E. Rocky Brands, Inc., Style RKCO55 (Certificate Number 25CY27-002426-225-02) [Gore-Tex Lining, Leather instep version] Ashore



## **Coyote Brown Safety Boots**

- A. Belleville Shoe Company, Style 533ST (Certificate Number 25CY27-002375-225-88) [SAFETY TOE] Ashore



- B. Rocky Brands, Inc., Style S2V 6104 (Certificate Number 25CY27-002373-225-88) [SAFETY TOE, Super fabric instep version] Ashore



- C. Rocky Brands, Inc., Style RKCO53 (Certificate Number 25CY27-002425-225-88) [SAFETY TOE, Leather instep version] Ashore



**Certified for wear DOD number pending**

A. Belleville Shoe Company, Style 330ST Ashore/Shipboard/Flight deck



B. Bates Shoe Company, Style E50501



C. Belleville Shoe Company, Style 330ST COY Ashore/Flight Crew only (not approved for Flightdeck use).





SPECIAL MEASUREMENTS BLANK FOR SPECIAL MEASUREMENT/ ORTHOPEDIC BOOTS AND SHOES		1. REQUISITION NO.
<b>GENERAL INSTRUCTIONS</b>		
<p>1. Special measurement footwear will be requisitioned only if the individual cannot be fitted properly with tariff issue footwear within the regular or supplemental tariff size range.</p> <p>2. If the footwear of Military Clothing issue size can be modified or altered to provide a satisfactory fit by orthopedic or other adjustment which local Clothing and Equipage Repair Shops are authorized to make, special measurement footwear will not be requisitioned.</p> <p>3. A completed special measurement blank and a requisition for one (1) pair of special measurement shoes will be forwarded to the Defense Orthopedic Footwear Clinic, 495 Summer Street, Boston, MA 02210; commercial telephone (617) 451-3141, AV 955-3141, Telefax no. 955-3018; if the feet of an individual who requires special measurement footwear can be clearly and fully described by the completion of this blank without the use of a plaster cast. Additional special measurement shoes, up to authorized allowances, will be requisitioned after initial pair has been determined to be satisfactory, and a DOFC Form -10, "Fitting Report," has been completed and returned to DOFC within 30 days per Defense Logistics Agency Regulation 4235.18.</p> <p>4. If a plaster cast is required to show the measurements and characteristics of an injured, deformed, or distorted foot, the individual will be reported to Medical Regulating Officer, Office of The Surgeon General, for disposition instructions. In such cases, this special measurement blank will be used.</p> <p>5. All diagrams and instructions must be studied carefully and their directions strictly adhered to. All required measurements are to be taken accurately by Medical Officer accomplishing form to assure that the orthopedic footwear will fit properly. This blank need not accompany a replenishment requisition for the supply of additional pairs of special measurement footwear unless the special measurement footwear which was supplied previously does not fit properly.</p> <p>6. The name, grade, SSN and organization of the individual shown below shall also appear on the covering special measurement requisition and on subsequent replenishment requisitions. If one foot of an individual can be fitted properly with a shoe of Military Clothing issue size, the size and width of that shoe shall be shown on the covering special measurement requisition.</p>		
<b>2. PERSON TO BE FITTED</b>		
a. NAME (Last, First, Middle Initial)		b. DOD ID
c. HEIGHT	d. WEIGHT	
3. MEDICAL OFFICER, I certify that this individual cannot be properly fitted with boots or shoes within the regular or supplemental tariff size ranges and the supply of special measurement footwear as indicated herein is required.		
a. SIGNATURE	b. PRINTED NAME	c. DATE (YYYYMMDD)
d. MEDICAL OFFICER'S DIAGNOSIS		
e. IF THE DISABILITY DESCRIBED ABOVE IS NOT PERMANENT, INDICATE ITS PROBABLE DURATION (years)		

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**Armed Forces Shoe Form:** If a Sailor has a special shoe size fit or need, this is the form to use. This form applies only for Sailors who cannot access listed footwear through regular purchasing options. Qualified personnel would complete the form on behalf of the Sailor due to medical necessity of fit, who would then submit the completed form and associated documentation to the Defense Orthopedic Footwear Clinic (DOFC). The boot fit option is limited to government issued or required use. CONTACT THE UMO FOR THE LATEST FORM VERSION.