

APPLICATION FOR ASSIGNMENT TO HOUSING <i>(Before completing form, read Privacy Act Statement and Instructions on reverse)</i>				1. TYPE SERVICE DESIRED <i>(X one or both)</i>	
				a. MILITARY HOUSING	b. HOUSING REFERRAL
<b>SECTION I - APPLICANT INFORMATION</b>					
2. NAME OF SPONSOR <i>(Last, First, Middle Initial)</i>		3. PAY GRADE	4. SSN	5. DOD COMPONENT	
6. ADDRESS <i>(Street, City, State, Zip Code)</i>		7. TELEPHONE NUMBER		8. STATUS OF APPLICANT <i>(X one)</i>	
		a. HOME <i>(Area Code)</i>	b. DUTY <i>(DSN)</i>	a. MILITARY MEMBER	c. CIVILIAN
		9. MARITAL STATUS		b. MILITARY SPOUSE	d. FOREIGN NATIONAL
		10. I AM SEPARATED FROM MY DEPENDENTS <i>(X one)</i>			
		a. VOLUNTARILY	b. INVOLUNTARILY		
11. I REQUEST HOUSING FOR <i>(X one)</i>		<b>SECTION II - MILITARY CAREER INFORMATION <i>(Civilians skip to Item 15.)</i></b>			
a. SELF ONLY	b. SELF AND DEPENDENTS		14. DATES <i>(Enter in YYMMDD order)</i>	MILITARY APPLICANT	MILITARY SPOUSE
12. INSTALLATION/ORGANIZATION TRANSFERRED FROM			a. EFFECTIVE RANK/RATE DATE		
			b. ACTIVE DUTY SERVICE COMPUTATION		
			c. TIME REMAINING ON ACTIVE DUTY		
13. INSTALLATION/ORGANIZATION TRANSFERRED TO			d. EFFECTIVE CHANGE IN DUTY STATION		
			e. REPORT DATE		
			f. ESTIMATED FAMILY ARRIVAL DATE		
<b>SECTION III - DEPENDENT DATA</b>					
15. DEPENDENTS RESIDING WITH ME <i>(If more space is needed, continue on plain paper.)</i>					
a. NAME <i>(Last, First, Middle Initial)</i>	b. DATE OF BIRTH <i>(YYMMDD)</i>	c. SEX	d. RELATIONSHIP	e. REMARKS <i>(Handicap, health problems, expected additions to family, etc.)</i>	
<b>SECTION IV - HOUSING DATA</b>					
16. COMMUNITY HOUSING DESIRED <i>(X as applicable)</i>					
a. PURCHASE HOUSE	d. RENT HOUSE		g. RENT MOBILE HOME SPACE		j. ROOM AND BOARD
b. PURCHASE CONDOMINIUM	e. RENT APARTMENT		h. SHARE		k. SUBLET
c. PURCHASE MOBILE HOME	f. RENT MOBILE HOME		i. RENT ROOM		l. TRANSIENT
17. AMENITIES DESIRED <i>(X as applicable. Write number in d. and e.)</i>			18. DATE HOUSING NEEDED <i>(YYMMDD)</i>		19. PRICE RANGE <i>(Community Housing)</i>
a. FURNISHED	e. NO. BATHS				
b. UNFURNISHED	f. PETS <i>(Allowed)</i>				
c. AIR CONDITIONING	g. OTHER <i>(Explain)</i>		20. LOCATION PREFERENCE <i>(Community Housing)</i>		
d. NO. BEDROOMS					
21. REMARKS					
22. SIGNATURE OF APPLICANT				23. DATE SUBMITTED <i>(YYMMDD)</i>	
<b>SECTION V - DISPOSITION <i>(To be completed by the Housing Office.)</i></b>					
24. MILITARY HOUSING					
a. APPLICATION RECEIVED <i>(YYMMDD and time)</i>	b. APPLICATION EFFECTIVE <i>(YYMMDD)</i>	c. DD FORM 1747 PROVIDED <i>(YYMMDD)</i>	d. HOUSING AVAILABILITY <i>(Boxes indicated on DD Form 1747)</i>		
e. APPLICANT PLACED ON WAITING LIST	f. EFFECTIVE PLACEMENT <i>(YYMMDD)</i>	g. BEDROOMS REQUIRED	h. DATE UNIT ASSIGNED <i>(YYMMDD)</i>		
<b>SECTION VI - HOUSING REFERRAL CERTIFICATE</b>					
On this date I have received a listing of the housing restrictions approved by the Installation Commander, and I will not reside in any property on the restricted list. I have been briefed on (1) the services provided by the Housing Office, (2) the DoD program on equal opportunity for military personnel in off-base housing, and (3) nondiscrimination based on physical or mental handicaps.			In addition, if any facility refuses to rent or sell to me or I have reason to believe I am being discriminated against, I will promptly notify the Housing Office.		
25. SIGNATURE OF APPLICANT			26. DATE SIGNED <i>(YYMMDD)</i>		

# PRIVACY ACT RELEASE FORM

## PRIVACY ACT STATEMENT

Information contained on this form is maintained under the systems of records notice NM11101-1 DON Family and Bachelor Housing Program (April 1, 2008, 73 FR 17334). **AUTHORITY:** 10 U.S.C. 5013, Secretary of the Navy; 10 U.S.C. 5041, Headquarters, Marine Corps; 10 U.S.C. 2831, Military Family Housing Management Account; DoD 4165.63-M, DoD Housing Management; and E.O. 9397 (SSN). **PRINCIPLE:** Military/civilian personnel eligible for/interested in occupying DON housing and those occupying DON housing (including privatized housing). **PURPOSE:** To determine an individual's eligibility for Navy or Marine Corps housing and to oversee housing occupancy once assigned. **ROUTINE USE:** In addition to those disclosures generally permitted under 5 U.S.C. 552a(b) of the Privacy Act, these records or information contained therein may specifically be disclosed outside the DoD as a routine use pursuant to 5 U.S.C. 552a(b)(3) as identified in the Systems Notice. **DISCLOSURE:** Mandatory

To Whom It May Concern:

I am aware that the Privacy Act of 1974 prohibits release of personal information without my approval. I do hereby authorize the Military Housing Office, Tarawa Terrace, North Carolina to release the information contained in this housing request to the privatized partner's, for purposes of requesting exceptions to housing policy that impact occupancy of assignment to privatized housing, application for assignment to housing, or solicitation of information for assignment to private sector housing in accordance with BO P11101.31A.

Name of Sponsor  
(Please Print): \_\_\_\_\_

Or

Name of Spouse  
(with Power of  
Attorney)  
(Please Print): \_\_\_\_\_

Current Mailing Address  
(Please Print): \_\_\_\_\_

Cell Phone Number: \_\_\_\_\_

Work/Home Number: \_\_\_\_\_

Signature: \_\_\_\_\_

Date: \_\_\_\_\_

PRIVACY ACT STATEMENT: AUTHORITY U.S.C. 3101 (Executive Order 9397) This request is for your private information, including social security number and personal history information, is to assist our office in determining eligibility for services, compliance with state and federal law, and related purposes.

ROUTINE USE (S): Information provided is used to determine eligibility for housing and for other lawful purposes.

MANDATORY/VOLUNTARY DISCLOSURE CONSEQUENCES OF REFUSAL TO DISCLOSE: Disclose of personal historical information is voluntary and there will be no adverse consequences from refusal to disclose. However, refusal to provide necessary background information may preclude your occupancy in housing.

### PET REGISTRATION ADDENDUM

Name \_\_\_\_\_ Date \_\_\_\_\_  
(SVM Last name, First name, MI)

Address: \_\_\_\_\_

1. Do you have any pets? (Circle choice) YES NO  
(If you answered no, sign and turn in form)

2. How many pets do you have? \_\_\_\_\_

3. Prohibited canine breeds are described as dogs that possess dominant traits of aggression. The following contains a list of prohibited canine breeds. Full or mix breed of:

- a. Pit Bull
- b. Rottweiler
- c. Wolf Hybrid

d. Any canine breed with dominant traits of aggression and presents an unreasonable risk to the health and safety of residents assigned to privatized quarters.

4. # \_\_\_\_\_ Prohibited Breeds # \_\_\_\_\_ Non Prohibited Breeds

#### PET INFORMATION (Circle Answers)

PET #1 Type of Pet: CAT / DOG

If DOG, state BREED: \_\_\_\_\_

Is pet registered with the Base Veterinary Office? YES NO

Have you submitted a copy of registration to the Military Housing Office? YES NO

Have you submitted a copy of registration to the Privatized Partner? YES NO

PET #2 Type of Pet: CAT / DOG

If DOG, state BREED: \_\_\_\_\_

Is pet registered with the Base Veterinary Office? YES NO

Have you submitted a copy of registration to the Military Housing Office? YES NO

Have you submitted a copy of registration to the Privatized Partner? YES NO

Signature: \_\_\_\_\_

# SEX OFFENDER POLICY ACKNOWLEDGEMENT & DISCLOSURE

## PRIVACY ACT STATEMENT

**Authority:** 10 U.S.C. § 5013, 10 U.S.C. § 5041, 10 U.S.C. § 2831, DoD 4165.63-M and E.O. 9397.

**Principle Purposes:** To determine an individual's eligibility for Navy housing; including privatized housing.

**Routine Uses:** Used by region and installation housing office personnel to determine eligibility for Navy housing and by private partners who operate privatized Navy housing for management and operational purposes.

**Disclosure:** Voluntary; however, failure to provide the requested information may impact eligibility for Navy housing, including privatized housing.

**POLICY STATEMENT:** In accordance with OPNAVINST 1752.3, to the maximum extent permitted by law or otherwise waived by Commander, Navy Installations Command or the Chief of Naval Personnel (CNP), sex offenders are to be identified & prohibited from accessing Navy facilities and occupying Navy owned, leased, or PPV housing.

**Sex Offender Definition:** Any person convicted of a criminal offense requiring registration per the National Guidelines for Sex Offender Registration and Notification Act (SORNA) (42 U.S.C. §§ 16901-16962).

## NOTICE OF REQUIREMENT TO DISCLOSE

	INITIAL
1. Military sponsors requesting assignment to Navy owned, leased or privatized housing are required to sign this acknowledgment and disclosure form.	
2. Occupancy of Navy owned, leased or privatized housing will not be approved for otherwise eligible applicants if the applicant, any authorized dependent, or live-in aide residing in the home is a sex offender.	
3. Anyone discovered to be a sex offender in the application process shall be denied access to Navy owned, leased or privatized housing.	
4. Anyone found to be a sex offender after taking occupancy may lose the privilege of residing in Navy owned, leased or privatized housing, may be barred from the installation, and/or may be evicted. If eviction occurs you may be responsible for all relocation expenses.	
5. The Installation or Region Housing Program Director will immediately forward information regarding identified sex offenders to the Installation N3, N9 and supports SJA/OGC offices, to include a copy of the applicant's DD 1746 and this form. All information will be forwarded to CNIC within two working days.	
6. Anyone found to have falsely certified this Acknowledgment shall be referred for barment or eviction, as appropriate, and may be responsible for relocation expenses.	
7. Denial of an application for assignment to Navy owned, leased or privatized housing under the applicable policy, may be appealed to the Region Commander via the military sponsor's chain of command.	

**CERTIFICATION:** I have read and understand the above policy. By my signature below, I certify that under a penalty of administrative action and/or prosecution for making a false official statement in violation of 18 U.S.C § 1001 and/or the Uniform Code of Military Justice, Article 107, that neither I nor any person living in my household is a registered/convicted sex offender. I understand that I am required to notify the Navy's Housing Office and the Installation Security Office immediately if circumstances change so that this certification is no longer true.

Signature

Date

Print Name

Command

# FAMILY HOUSING DIVISION CAMP LEJEUNE, NC

## STATEMENT OF UNDERSTANDING FOR ON-BASE HOUSING

\_\_\_\_\_ I understand my application will not be on the active wait list if I do not have all necessary documents when I apply.

\_\_\_\_\_ I understand if my application is Incomplete (i.e., missing documentation), the application will be placed Inactive for 45 days. If the pending documentation is not received within 45 days, my application will be canceled.

\_\_\_\_\_ I understand if I do not provide the required documents for my pet(s), (i.e., proof of shots, microchip, nor registration at the Base Veterinarian Office), when I apply, my name will not be on the active wait list.

\_\_\_\_\_ I understand if I do not provide documentation for my pet(s) within 45 days of applying for base housing, my application will be **CANCELLED** without further notice.

\_\_\_\_\_ I understand it is my responsibility to keep Family Housing apprised of all changes in assignment (i.e., telephone number, unit of assignment, promotion, deployment, TAD, etc),

\_\_\_\_\_ I **have/have not** authorized my spouse to accept quarters. If I cannot be reached, (i.e., deployed, TAD, or other military commitment, etc).

\_\_\_\_\_ I understand a new applicant can be moved ahead of me on the wait list until I reach the top 10% or top three (3) positions (Frozen zone), whichever is greater.

\_\_\_\_\_ I understand waiting periods are estimates based on historical data, number of vacancies becoming available, etc.

\_\_\_\_\_ I understand if I am unable to accept quarters during a certain period, I can place my application inactive for one year **ONLY**.

\_\_\_\_\_ I have requested to be placed on the \_\_\_\_\_ waitlist. I understand that I have 30 days from the date of my application to switch waiting lists and retain my original control date.

\_\_\_\_\_ I understand when my name is number one on the waiting list: I will be offered quarters that will become available within 30 - 60 days.

\_\_\_\_\_ I understand that once I am called and offered quarters, I **CANNOT** request to go **INACTIVE**.

\_\_\_\_\_ I understand if I refuse a house offer - my application will be **CANCELED**.

PRINT NAME: \_\_\_\_\_

SIGN: \_\_\_\_\_ DATE: \_\_\_\_\_