

ADMINISTRATIVE REMARKS  
NAVPERS 1070/613 (REV. 10-81)  
S/N 0106-LF-010-6991

E-32

SHIP OR STATION PERSONNEL SUPPORT DETACHMENT PORTSMOUTH VA

STATEMENT OF UNDERSTANDING FOR BAH ENTITLEMENT

BAH DEPENDENTS AT DEPENDENTS LOCATION:

\_\_\_\_\_ : I ( ) hereby understand that my eligibility of BAH at dependents location requires Commander, Navy Personnel Command (PERS-451H) via service members Commanding Officer's approval. Request must be submitted to:

Commander, Navy Personnel Command (PERS-451H)  
5720 Integrity Drive  
Millington, TN 38055-4540

I also certify that the address shown below is the primary residence of my dependents.

BAH DEPENDENTS AT PDS LOCATION:

\_\_\_\_\_ : I ( ) hereby understand that my eligibility of BAH with dependents is based upon the dependents listed on my NAVPERS 1070/602. I further understand that if there is a change in dependency status (marriage, divorce, death or birth), dependent's address and/or assignment to government quarters that I must immediately notify the Personnel Officer and update my NAVPERS 1070/602.

I also certify that the address shown below is the primary residence of my dependents.

BAH SINGLE (E6 and above):

\_\_\_\_\_ : I ( ) hereby reaffirm my request for Single BAH in lieu of assignment to government quarters and understand that I must have a commercial residence in the vicinity of the homeport. I further certify that I must maintain the address shown below during a deployment in order to maintain continuous entitlement to BAH Single. I also understand that it is my responsibility to report any change to my living arrangements and if applicable the status of my military spouse to the Personnel Officer.

I also certify that the address shown below is also the same address listed on the Command Recall Bill.

ADDRESS AND FIRST NAME/RELATIONSHIP OF DEPENDENTS

ADDRESS:

FIRST NAME/RELATIONSHIP \_\_\_\_\_

FIRST NAME/RELATIONSHIP \_\_\_\_\_

Any member who submits a claim for BAH which contain a false statement maybe subject to a disciplinary action for violation of the UCMJ and/or administrative action, including processing for administrative separation. In addition, fraudulent acceptance of benefits may cause a civilian recipient to be subject to criminal prosecution. The law provides for severe penalties of imprisonment and a fine. For military personnel, it can include dishonorable discharge, total forfeitures and confinement. You are required to ensure your Page 2 is accurate and that changes in dependent status (marriage, birth, divorce, separation or death) or location, are immediately reported to the chain of command and PSD Portsmouth.

MEMBER SIGNATURE \_\_\_\_\_

DATE \_\_\_\_\_

PERS SUPV BY DIRECTION \_\_\_\_\_

NAME (Last, First Middle)

SSN

USN