



Signature:_____





Date:_____



OKINAWA DOD MILITARY FAMILY HOUSING

Date Format YYYYMMDD

Name (Last, First, MI):	DOB:			DB:	Rank:				
DoD ID:		SSN:			DoD Component:				
Current Address:	Current Address:								
Cell: Alte	ernate Cell:	rnate Cell: Person			al E-mail:				
Duty Number:	Work E-mail:								
Marital Status:	Da	Date of Marriage: Family			Family Arrival Date:				
Dependents that will be residing with you:									
Name:		Date of Birth:	Sex:	Relationship:	Remarks:				
Gaining Installation: Gaining Squadron/Unit:									
Loosing Installation:		Date o	f Dep	arture From L	ast Duty Station:				
Effective Date of Current Rank: Date Entered Service:									
Time Remaining on Active Duty (EAS/Separation Date etc./Officer INDEF):									
Date of Arrival:	DEROS/RTD/PRD:								
Status of Applicant:	_Military MemberMilitary SpouseCivilian								
Pet Information									
Pet Type: ex. Cat/Dog	Dog Breed	d ONLY:	Number Of CatsNumber Of Dogs						
*Read and initial both statements**									
(AF ONLY) I understand I am only authorized 20 days of TLA from arrival date on island. I must secure									
housing within the allotted days. Failure to do so may result in out of pocket expenses.									
I agree to wait to sign any lease agreements until my command has approved me to reside off-base. I agree to keep the Housing Office updated with any changes to my lease and update my OHA when applicable.									

COMPLETE IF DUAL MILITARY

(Last, First, MI): MIL Soouse Name:		Rank/Service:				
Full SSN:	DOD ID:					
DEROS/RTD/PRD:	T-	Date Of Birth:				
Email:	ALT Ema	ail:				
Duty Phone:	Cell Pho	ne:				
Gaining Installation:	Gaining	Squadron/Unit:				
LoosingInstallation:						
Date of Departure From Last Duty Station:	Effective	e Date of Current Rank:				
	Time Po	maining on Active Dutv: (EAS/				
Date Entered Service:		on Date etc./Officer INDEF):				
Date of Arrival:	Date Re	ported to Military Housing Office:				
Signature:		Date:				

APPLICATION I	FOR ASSI	GNMENT TO	HOUSII	VG		1. T	YPE SERV	ICE DI	ESIRED (K one or bo	oth)	
(Before completing form, i	read Privacy Act	Statement and Instruc	ctions on rev	erse)			a. MILITAF	RY HOUS	ING	b. HO	USING REFERRA	
SECTION I - APPLICANT INFORMATION	N											
2. NAME OF SPONSOR (Last, First, Midd	le Initial)	3. PAY GRADI	E	4. S	SN	5. DOD COM			MPONENT			
6. ADDRESS (Street, City, State, Zip Code)		7. TELEPHON	E NUMBE	R		8. S	TATUS O	F APPL	ICANT	(X one)		
		a. HOME (Area Co	ode)	b. DUTY (DSN)			a. MILITA	RY MEM	BER	c. CIV	ILIAN	
							b. MILITA		-	+	REIGN NATIONAL	
		9. MARITAL S	TATUS	10. I	AM SEPARATEI) FROI						
					a. VOLUNTARILY					UNTARILY		
11. I REQUEST HOUSING FOR (X one)		<u> </u>		SECT	TION II - MILITAF	RY CAI	REER INFO	DRMAT	ION (Civi	lians skip to	o Item 15.)	
	D DEPENDENTS				DATES (Enter in Y)			1	RY APPLICA		ITARY SPOUSE	
12. INSTALLATION/ORGANIZATION TRANSFERRED FROM				a. EFFECTIVE RANK/RATE DATE								
				b. A0	CTIVE DUTY SERVICE	COMPU	TATION					
					ME REMAINING ON A							
13. INSTALLATION/ORGANIZATION	TRANSFERR	RED TO			FECTIVE CHANGE IN							
					PORT DATE							
				f. ESTIMATED FAMILY ARRIV			ATE					
SECTION III - DEPENDENT DATA								Į.				
15. DEPENDENTS RESIDING WITH M	E (If more space	e is needed, continue	on plain pap	er.)								
	<u> </u>	b. DATE OF BIRTH				a RE	MARKS (Har	ndican h	ealth proble	me avnaci	ted additions to	
a. NAME (Last, First, Middle Initial)		(YYMMDD) c. SEX		d.	RELATIONSHIP	e. REMARKS (Handicap, hear			amily, etc.)			
SECTION IV - HOUSING DATA			I			1						
16. COMMUNITY HOUSING DESIRED	(X as applicab	ile)										
a. PURCHASE HOUSE		d. RENT HOUSE			g. RENT MOBILE H	OME SP.	ACE		j. ROOM	1 AND BOA	ARD	
b. PURCHASE CONDOMINIUM		e. RENT APARTMENT			h. SHARE				k. SUBLET			
c. PURCHASE MOBILE HOME f. RENT MOBILE HOME		OME	i. RENT ROOM				I. TRANSIENT					
17. AMENITIES DESIRED (X as applicable. Write number in d.		in d. and e.)		18. DATE HOUSING		NEEDED		19. PRICE RANGE				
a. FURNISHED		e. NO. BATHS		(1	(YYMMDD)			(Community Housing)				
b. UNFURNISHED		f. PETS (Allowed)		1								
c. AIR CONDITIONING		g. OTHER (Explain)		20.	20. LOCATION PREFERENCE (Comi			nity Hous	ing)			
d. NO. BEDROOMS												
21. REMARKS	<u> </u>	APPLY/INF	PRO/RFI (<u>, </u>		** CO	MPLETE IF	DUAL N	MILITARY	**		
DEROS/RTD/PRD:		7 = 17			MIL SPOUSE NA	ME:						
DOB: EMAIL:	AL	T EMAIL:			RANK/SERVICE: FULL SSN:					=		
DOB:EWAIL.					DOD ID:							
DoD ID: Da	ate of marria	ige:			DEROS/RTD/PRI	D:						
					EMAIL:					-		
NUMBER OF CAT(S): NUMB	SER OF DOG	i(S):			ALT EMAIL: DUTY PHONE:_							
DOG BREED(S):	1				DATE OF BIRTH:							
22. SIGNATURE OF APPLICANT								23.	DATE SU	JBMITTE	D	
									(YYMMDD)			
SECTION V - DISPOSITION (To be complete)	eted by the Hous	ing Office.)										
24. MILITARY HOUSING												
a. APPLICATION RECEIVED (YYMMDD and time)	b. APPLICATION	ON EFFECTIVE (YYMM	IDD)	c. DD	FORM 1747 PROVIDI YMMDD)	ED			HOUSING A indicated or			
							<u> </u>					
e. APPLICANT PLACED ON WAITING LIST	f. EFFECTIVE PLACEMENT (YYMMDD)			g. BEDROOMS REQUIRED			h. DATE UNIT ASSIGNED (YYMMDD)					
SECTION VI - HOUSING REFERRAL CI	RTIFICATE			1				1				
On this date I have received a listin	a of the hou	sing restrictions	annroved		In addition, if a	nv fac	ility refue	es to	rent or	sell to n	ne or I have	
by the Installation Commander, and I	-	•			on to believe I an	•	•					
restricted list. I have been briefed					lousing Office.							
Housing Office, (2) the DoD progra	•	• • •	•	25.	SIGNATURE OF	APPLIC	CANT		7		TE SIGNED	
personnel in off-base housing, and (3) or mental handicaps.	, nonaiscrim	mation based on	pnysical							IYYN	MMDD)	

APPLICATION FOR ASSIGNMENT TO HOUSING

PRIVACY ACT STATEMENT

AUTHORITY: 5 USC 5911 & 5912.

PRINCIPAL PURPOSE: To identify customer needs for assistance and housing requirements.

ROUTINE USE: None.

DISCLOSURE: Voluntary; however, failure to provide the requested information will result in our inability to assist you.

GENERAL INSTRUCTIONS

This form provides the Housing Office with information that will be used to provide you with military and/or community housing. All items not listed are self-explanatory. SECTION I (APPLICANT INFORMATION), SECTION II (MILITARY CAREER INFORMATION), SECTION III (DEPENDENT DATA), AND SECTION VI (HOUSING DATA) are to be completed by the applicant. Information on military spouses is now being requested for Basic Allowance for Quarters (BAQ) entitlement which must be included on your Military Pay Order that is forwarded to your respective financial center.

1. TYPE SERVICE DESIRED

Military Applicants: If temporary community housing is desired while awaiting military housing, mark both boxes in Item 1, and answer all questions.

Civilian Applicants: Mark the box "Housing Referral" services in Item 1b, and answer all questions.

SECTION I - APPLICANT INFORMATION

5. DOD COMPONENT

Army, Navy, Air Force, etc.

6. ADDRESS

Enter complete current address (street number and name, apartment number, city, state/country and the 9-digit ZIP code).

12. INSTALLATION/ORGANIZATION TRANSFERRED FROM

Enter the name of the installation you transferred from.

13. INSTALLATION/ORGANIZATION TRANSFERRED TO

Enter the name of the installation to which you are applying for housing. Include the name of the Organization/Department you will be assigned to.

SECTION II - MILITARY CAREER INFORMATION

14. DATES (Military Applications/Military Spouse Only)

Enter dates in order of YYMMDD. (May 17, 1993, would be entered as 930517).

- a. Enter the date your current rate/rank was effective.
- b. Enter your active duty service computation date.
- c. Enter the time (in months) that you have remaining on active duty.
- d. Enter the effective date you were dropped from accountability at your previous duty station and gained on the rolls at your new duty station for record purposes. For overseas assignment, enter your date of departure from CONUS.
 - e. Enter your official report date (from your PCS orders).
 - f. Enter your estimated arrival date.

SECTION III - DEPENDENT DATA

15. DEPENDENTS RESIDING WITH ME

- a. through d. List requested data for all authorized dependents who will be residing with you.
- e. Provide the Housing Office with information regarding any handicapped dependent or special family health problems that might influence your preference for a particular type of housing; i.e., single level vs. two story, ramps for wheelchairs, expected additions to family, etc.

SECTION IV - HOUSING DATA

16 - 21. Self-explanatory.

22. SIGNATURE

The applicant must sign the DD Form 1746.

23. DATE SUBMITTED

Enter the date the application was submitted to the Housing Office.

SECTION V - DISPOSITION (To be completed by the Housing Office)

24. MILITARY HOUSING

- a. **Application Received.** Enter the year, month, day and time the application was received in the Housing Office.
- b. **Application Effective.** Enter the date of change of duty station (*Line 14d*) or other date that will be the effective (*control*) date.
- c. **DD Form 1747 Provided.** Enter the date that the DD Form 1747 was sent to the military applicant.
- d. **Housing Availability.** Enter the item letter for the applicable box(es) marked under Item 4 of the DD Form 1747 returned to the applicant.
- e. **Applicant Placed on Waiting List.** Enter the identification of the assignment waiting list(s) to which the applicant is placed.
- f. **Effective Placement.** The effective date and time of the applicant's placement on the list(s).
- g. **Bedrooms Requirement.** Enter the number of bedrooms required, based on dependent data in Item 15.
 - h. Date Unit Assigned. Enter the date the unit was assigned.

SEX OFFENDER DISCLOSURE AND ACKNOWLEDGEMENT

Attach to application for military, government-managed and privatized housing

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household is a registered sex offender or require to notify the installation housing office immediation longer true. I understand the policies, procedure	have read and understand the policy. By of perjury that neither I nor any person living in my red to register as a sex offender. I understand I am required ately if circumstances change so that this certification is no res and consequences below apply to those persons who he DD Form 1746, <i>Application for Assignment to</i>				
	POLICIES				
	om persons applying for military, government-managed or o intend to have dependents who are sex offenders reside				
	de with you, are found to be registered or are required to state, you could be denied residency in Air Force military,				
If you, anyone living in your household or visito you may be subject to eviction and/or barment f	or is found to be a sex offender after you take occupancy, from the Installation.				
	ove or disapprove applications from persons for residency housing when they or another prospective resident of the				
PI	ROCEDURES				
a sex offender will be required to submit written	ney or a dependent who will reside in the home with them is information and documentation, which may include but is dered for housing by the Installation Commander:				
 Whether the sex offender is the military me Nature and circumstances of the offense 	mber, civilian or dependent				
3. Exact criminal statute or law under which the4. State or jurisdiction where the offense occur	•				
5. Elapsed time since the offense was committed 6. Age of the offender at the time the offense was committed					
7. Age of the victim at the time the offense was committed 8. Evidence that tends to demonstrate offender's rehabilitation, exemplary conduct, or other commitmen					
to obeying the law Whether the conviction requiring registration has been reversed, vacated, or set aside, or if the registrant has been granted unconditional pardon of innocence for the offense requiring registration					
10. Conditions of parole/probation or monitorin	g, if any				
Falsification of this form or any other information	NSEQUENCES on pertaining to your criminal history or sexual offenses on for or retention of military, government-managed or				
Signature of Applicant	Date				

SEX OFFENDER DISCLOSURE AND ACKNOWLEDGEMENT

Attach to application for military, government-managed and privatized housing

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signing this document, I certify under a penalty household is a registered sex offender or require to notify the installation housing office immedia longer true. I understand the policies, procedur	have read and understand the policy. By of perjury that neither I nor any person living in my ed to register as a sex offender. I understand I am required tely if circumstances change so that this certification is no es and consequences below apply to those persons who he DD Form 1746, <i>Application for Assignment to</i>			
]	POLICIES			
	om persons applying for military, government-managed or o intend to have dependents who are sex offenders reside			
	de with you, are found to be registered or are required to tate, you could be denied residency in Air Force military,			
If you, anyone living in your household or visito you may be subject to eviction and/or barment for	r is found to be a sex offender after you take occupancy, rom the Installation.			
	ve or disapprove applications from persons for residency housing when they or another prospective resident of the			
PR	OCEDURES			
Applicants who cannot sign this form because the a sex offender will be required to submit written	ey or a dependent who will reside in the home with them is information and documentation, which may include but is dered for housing by the Installation Commander:			
 Whether the sex offender is the military men Nature and circumstances of the offense 				
3. Exact criminal statute or law under which the4. State or jurisdiction where the offense occur				
5. Elapsed time since the offense was committed.6. Age of the offender at the time the offense was committed.				
7. Age of the victim at the time the offense wa8. Evidence that tends to demonstrate offender to obeying the law	as committed r's rehabilitation, exemplary conduct, or other commitment			
Whether the conviction requiring registration has been reversed, vacated, or set aside, or if the registrant has been granted unconditional pardon of innocence for the offense requiring registration				
10. Conditions of parole/probation or monitoring	g, if any			
Falsification of this form or any other informatio	SEQUENCES In pertaining to your criminal history or sexual offenses on for or retention of military, government-managed or			
Signature of Applicant	Data			
Signature of Applicant	Date			