



# OKINAWA MILITARY FAMILY HOUSING

## PATIO AWNING STANDARDS

The occupant acknowledges and agrees to comply with the following self-help project requirements and must obtain an approved AF Form 332 prior to installation:

1. The structure must be free-standing, and supports may not be drilled into any walls.
2. The frame must be fabricated from corrosion-resistant materials and finished to match the existing structure.
3. Fabric materials must consist of industrial-grade vinyl in neutral tones only (beige, white, light tan, or cream).
4. Support elements must not penetrate the ground more than 6 inches.
5. The structure must not block or interfere with any exit from the living area.
6. Maximum size is 10 × 12 feet; no portion may hang lower than 7 feet above ground level.
7. The structure shall be capable of complete disassembly and storage within 30 minutes upon issuance of TCCOR 3. Installation shall not occur until the “All Clear” condition is declared.
8. The structure shall maintain a professional appearance at all times.
9. Canopy or outdoor patio umbrellas must be folded down after each use.

**Self-Help Projects:** Self-help projects allow occupants to make minor improvements to their quarters but must not create additional maintenance or repair costs to the Government. An approved **AF Form 332** is required before any work begins. To obtain approval, occupants must complete and submit AF Form 332 to their nearest Housing Office; additional coordination may be required. Occupants must restore their unit to its original condition upon vacating.

**Disclaimer:** The occupant assumes full responsibility for the installation, maintenance, use, and removal of the patio awning. Approval does not imply endorsement or acceptance of liability by the United States Government, the United States Air Force, or their representatives. The Government shall not be responsible for any damage, loss, or injury resulting from weather, environmental conditions, structural failure, improper installation, or occupant actions. No compensation or repair services will be provided. Private insurance is strongly recommended.

**Occupant Signature / Date:** \_\_\_\_\_