APPLICATION FOR ASSIGNMENT TO HOUSING							1. TYPE SERVICE DESIRED (X one or both)				
(Before completing form, read Privacy Act Statement and Instructions or and and					2)		a. MILITARY HOUSING b. HOUSING REF				
SECTION I - APPLICANT INFORMATION											
2. NAME OF SPONSOR (Last, First, Midd	le Initial)	3. PAY GRADE	•	4. S	SN		5. DOD	COMPO	ONENT		
6. ADDRESS (Street, City, State, Zip Code)		7. TELEPHONE NUMBE				8. S1	STATUS OF APPLICA			one)	
		a. HOME (Area Code) 9. MARITAL STATUS		b. DU	b. DUTY <i>(DSN)</i>		a. MILITA	RY MEMBI	ER	c. CIVILIAN	
						L	b. MILITA			d. FOREIGN NATIONAL	
		9. MARITAL S	IAIUS	10. I	AM SEPARATED	FROM	MY DEP	ENDEN	ITS (X one)		
					a. VOLUNTARILY				b. INVOLU		
11. I REQUEST HOUSING FOR (X one)					TION II - MILITAR			1	•		
a. SELF ONLY b. SELF ANI 12. INSTALLATION/ORGANIZATION T	ED EDOM		14. DATES (Enter in YYMMDD order)			MILITARY APPLICANT MILITARY SPOUSE					
12. INSTALLATION/ONGANIZATION II	ED FROIVI		a. EFFECTIVE RANK/RATE DATE								
			b. ACTIVE DUTY SERVICE COMPUTATION								
13. INSTALLATION/ORGANIZATION TRANSFERRED TO				c. TIME REMAINING ON ACTIVE DUTY							
13. INSTALLATION/ORGANIZATION TRANSPERRED TO				d. EFFECTIVE CHANGE IN DUTY STATION							
			e. REPORT DATE		ATE .						
SECTION III - DEPENDENT DATA			f. ESTIMATED FAMILY ARRIVAL DATE								
15. DEPENDENTS RESIDING WITH ME	(If more snace	e is needed continue	on plain no	iner)							
10. DEL ENDERTO REGIDINO WITTIME	- (I) More space	b. DATE OF BIRTH	on plain pe	iper.)		. DEI	AADKS (Ham	diam ha	-1410 10110101	avvaastad additious	
a. NAME (Last, First, Middle Initial)		(YYMMDD)	c. SEX	d. RELATIONSHIP		e. REMARKS (Handicap, health prob to family,			family, etc		
		(
SECTION IV - HOUSING DATA		Į.	I	1							
16. COMMUNITY HOUSING DESIRED	(X as applicab	le)									
a. PURCHASE HOUSE		d. RENT HOUSE		g. RENT MOBILE HOME SPACE			ACE		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 18. DATE HOUSING NEEDED				I. TRANSIENT				
17. AMENITIES DESIRED (X as applicable	ITIES DESIRED (X as applicable. Write number in d. and e.)					D	19. PRICE RANGE				
a. FURNISHED		e. NO. BATHS		(YYMMDD)				(Community Housing)			
b. UNFURNISHED		f. PETS (Allowed)									
c. AIR CONDITIONING		g. OTHER (Explain)		20. LOCATION PREFERENCE (Comm				unity Housing)			
d. NO. BEDROOMS											
21. REMARKS											
Duty Email:				I,							
Personal Email:	Give the Housing Office authorization to release my										
Cell Phone:											
Cell Phone: Privacy Act Information to The Property Owner Spouse Phone:											
•											
Spouse Email:											
Number of Pets: 22. SIGNATURE OF APPLICANT								22 D	ATE CLID	MITTED	
									23. DATE SUBMITTED (YYMMDD)		
SECTION V - DISPOSITION (To be comple	atad by the Her	sing Office \						<u> </u>			
24. MILITARY HOUSING	teu by the Hou.	sing Office.									
a. APPLICATION RECEIVED	b. APPLICATIO	N EFFECTIVE <i>(YYMM</i>	IDD)		FORM 1/4/ PROVIDE	:D				AILABILTTY (Boxes	
(YYMMDD and time)			(YYMMDD)				indicated on DD Form 1747)				
e. APPLICANT PLACED ON WAITING LIST f. EFFECTIVE PLACEMENT (YYMMDD)			OD)	g. BEDROOMS REQUIRED			h. DATE UNIT ASSIGNED (YYMA			SSIGNED (YYMMDD)	
SECTION VI - HOUSING REFERRAL CE	RTIFICATE			1				İ			
		cina rostrictions	annroyed		In addition if a	ny foo	ility rofus	os to r	ont or co	ll to mo or I have	
On this date I have received a listing by the Installation Commander, and I				reaso						Il to me or I have will promptly notify	
restricted list. I have been briefed on (1) the services provided by the the					eason to believe I am being discriminated against, I will promptly notify he Housing Office.						
					25. SIGNATURE OF APPLICANT				26	6. DATE SIGNED	
personnel in off-base housing, and (3) nondiscrimination based on physical or mental handicaps.								(YYMMDD)			
от птетнагнаникарѕ.											

SEX OFFENDER DISCLOSURE AND ACKNOWLEDGEMENT

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

I, (print name) ______, have read and understand the policy. By signing this document, I certify under a penalty of perjury that neither I nor any person living in my household is a registered sex offender or required to register as a sex offender. I understand I am required to notify the installation housing office immediately if circumstances change so that this certification is no longer true. I understand the policies, procedures and consequences below apply to those persons who will reside with me, all of whom are listed on the DD Form 1746, *Application for Assignment to Housing*.

POLICIES

Air Force Installations requires full disclosure from persons applying for military, government-managed or privatized housing who are sex offenders or who intend to have dependents who are sex offenders reside with them.

If you, or an authorized dependent who will reside with you, are found to be registered or are required to register as a sex offender under the laws of any state, you could be denied residency in Air Force military, government-managed and privatized housing.

If you, anyone living in your household or visitor is found to be a sex offender after you take occupancy, you may be subject to eviction and/or barment from the Installation.

Installation Commanders are authorized to approve or disapprove applications from persons for residency in military, government-managed and privatized housing when they or another prospective resident of the home is a sex offender.

PROCEDURES

Applicants who cannot sign this form because they or a dependent who will reside in the home with them is a sex offender will be required to submit written information and documentation, which may include but is not limited to the following, in order to be considered for housing by the Installation Commander:

- 1. Whether the sex offender is the military member, civilian or dependent
- Nature and circumstances of the offense
- 3. Exact criminal statute or law under which the person was convicted
- 4 State or jurisdiction where the offense occurred and was adjudicated
- 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 commitment to obeying the law
- 9. 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, if any

CONSEQUENCES

Falsification of this form or any other information pertaining to your criminal history or sexual offenses will result in immediate denial of your application for or retention of military, government-managed or privatized housing.

Signature of Applicant	Date

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.