DEPARTMENT OF DEFENSE (DOD) TRANSPORTATION AGREEMENT TRANSFER OF CIVILIAN EMPLOYEES OUTSIDE CONUS (OCONUS)

(Outside the 48 Contiguous States and the District of Columbia)

PRIVACY ACT STATEMENT

(5 U.S.C. §552a)

AUTHORITY: 5 U.S.C. §5701, §5722, §5723, §5724, and E.O. 9397 (SSN).

PRINCIPAL PURPOSE(S): Used to establish Government time in service requirements in order for the employee (including appointees and student trainees) to be eligible for travel and transportation expenses when transferred to positions outside the Continental United States (OCONUS).

ROUTINE USE(S): In addition to being used by officials and employees of the applicant's Service in determining eligibility for travel and transportation expenses, the information contained herein may be provided to law enforcement personnel investigating those suspected of fraudulently obtaining allowances.

investigating those suspec DISCLOSURE: Voluntary; paid. The personal information	however, com	pletion of this fo	rm is necessary l		be authorized and expenses
A. EMPLOYEE NAME (Last,	·		B. TYPE OF A		
			INITIAL RENEWAL		CHANGE OF STATION (PCS) ONLY CONJUNCTION WITH PCS
C. EMPLOYEE SSN	D. NEW APPOINTEE OR STUDENT TRAINEE YES NO E. REPORT DATE TO NEW OR FIRST DUTY STATION (PDS) (YYYYMMD)				
F. LAST PDS LOCATION			ESIDENCE AT TIN itial agreement)	ME OF APPOINTME	NT (To be determined
(including new appointees immediate family, moveme incident to an appointment	or student trainers and storage or transfer to ent travel. Understeel	nees eligible for e of household go an OCONUS loc der the law, the rice for a prescrib	first PDS travel), bods (HHG) and pation, except mo allowances shall bed period of time	appropriate allowa personal effects, an vement and storag not be authorized u	nd certain other allowances e of HHG is not allowed for unless the employee agrees in
2. I understand and agree	that:				
allowances at Government	expense for m for purpose of	nyself, my depen separation from	dents, or my hou	sehold effects, to	urn travel and transportation my actual residence at time of for reasons beyond my control
appointment to my new Or concerned. If I fail to rema of the required minimum p equivalent to what the Gov myself and my dependents OCONUS temporary quarte any other related allowance	CONUS PDS, under in service the control of service vernment paid in e.g., HHG steps subsistence incident to reconstructions.	unless separated ne required minir e, I am obligated for travel and tra orage and shipm e allowance), rea my transfer, fron	for reasons beyomum period of tire and will, upon dansportation and ent, CONUS tem I estate and/or reasons beginning point	nd my control that ne, or if I am removement, repay to the related allowances porary quarters sublocation expenses, of travel to the PE	e date of my transfer or are acceptable to the agency wed for cause before expiration are Government a sum of money associated with the transfer of posistence expenses, (but not miscellaneous expenses, and DS. The employing Agency may a violation of this agreement.
3. I understand that the p transportation allowances,		•	•	•	ning my eligibility for travel and
H. EMPLOYEE SIGNATURE		(Coi	ntinued on Back)		L DATE CIONED AGGAGGG
TI. LIVIPLUTEE SIGNATURE	-				I. DATE SIGNED (YYYYMMDD

4. I understand and agree that the address shown above is my actual residence at time of appointment and that it will be used for the purpose of determining transportation entitlement and that this address is not subject to later change for personal reasons.
5. I understand that I may be required to use commercial or Government aircraft for necessary travel to or from my OCONUS PDS unless a medical reason precludes the use of aircraft.
6. I also understand it is neither cost effective nor efficient for DoD to provide more than one PCS move at Government expense during any 12-month period. Accordingly, except as provided in JTR, par. C4100, I am not entitled to any further PCS transfers within DoD, at Government expense, for a period of 12 months from the date of this transfer. This policy does not preclude my acceptance of another position for which PCS expenses may not be allowed.
NOTE: Employee should retain a copy of signed transportation agreement for their personal files.
J. OTHER REMARKS (To be completed by personnel office or employing agency officials only.)