Email or Fax to one Housing Service Center only		
From:	Date:	
Applicant's Email Address:		

Applicant's Phone Number:	Number of Pages:

Housing Service Center	Phone	Email Address	Fax
JEB Little Creek-Fort Story, Virginia Beach	757-462-8939	LittleCreekHousing@navy.mil	757-462-1244
NAS Oceana, Virginia Beach	757-433-3268	OceanaHousing@navy.mil	757-433-3310
NSA-Hampton Roads, Norfolk Northwest Annex, Chesapeake	757-445-2832	NSANorfolkHousing@navy.mil NWAnnexHousing@navy.mil	757-445-6818
NAVSTA Norfolk NNSY, Portsmouth	757-445-2832	NorfolkHousing@navy.mil Portsmouthvahousing@navy.mil	757-444-1544
NWS Yorktown	757-847-7806	YorktownHousing@navy.mil	757-847-7822

	NAVSTA Norfolk NNSY, Portsmouth	757-445-2832	NorfolkHousing@navy.mil Portsmouthvahousing@navy.mil	757-444-1544		
	NWS Yorktown	757-847-7806	YorktownHousing@navy.mil	757-847-7822		
SUE	3J: PPV Housing Application Page 1	ackage				
Plea	ase check documents included:					
	Public Private Venture (PPV) Fam	ily Housing (FH) Application			
	PPV FH Applicant Statement of U	nderstanding a	nd Continuation Sheet			
	Sex Offender Policy Acknowledge	ement & Disclo	sure Form			
	Courtesy Move Entitlement					
	Permanent Change of Station (PCS) Orders, DUINS, or Change of Homeport Certificate (CHC)					
Dependency Paperwork - Record of Emergency Data/Dependency Application (USN – Page 2: USMC – NAVMC 10922; USA & USAF – DD Form 93; USCG – 4170)						
	Leave and Earnings Statement (LES) - USA, USAF, USMC and CG must provide for BAH verification					
	Dual Military – Provide documentation for both members (orders & page2/RED)					
	Custody Paperwork – Provide custody/divorce decree (If service member and/or spouse were					
	previously married or legally separated and children will reside in the home for at least 6 months					
	Proof of Pregnancy - Provide letter with estimated due date noted by a healthcare professional					
	Power of Attorney - Required if s	pouse or desigr	nated representative is completing	g application.		

PU	BLIC F	PRIV	ATE VEN	TURE (PI	PV) FA Write L		HOUSIN	G (FH) APPLI	CA	TION
Service M	lember	Info	mation								
Service Mem	ber Name	: (Last,	, First, MI):	Complete SSI	N:	Gender:	Pay Grade	2:	Branch of Service	e:	Marital Status:
Cell Phone:		ı	Personal E-Mail	:	Military	E-Mail:			Remarks (Pre	egna	nt, LIMDU, etc.):
Military C	areer I	nforr	nation (use	e complete	dates)						
Reporting Co	mmand:				UIC/	RUC:	Projected F	Rotati	on Date:	E	AS/EAOS Date:
Date You Ma Rate/Rank:	de	I	Date You Joine	d the Military:		Date of Detachment from Previous Command: Date You Report to New Permane Command:			New Permanent		
Spouse Ir	nformat	ion,	if Married								
Name (Last,	First, MI):										
Date of Birth	:	Gend	ler:	Complete SS	N if Active	Duty:	Remarks (E	FM, F	Pregnant, etc.):		
Cell Phone:		W	ork Phone:		Personal	E-Mail:		Military E-Mail:			
Military S	nouse (Care	er Informat	ion. if Ann	licable	(use coi	mplete da	tes)			
Pay Grade:	Branch of Service:	of	Duty Statio				IC/RUC:		jected Rotation		EAS/EAOS Date:
			Date yo Comma		hed from Last Date you Report to new Permanent Command:						
Depender	nts Resi	idina	with Servi	ce Member	r (exclu	de spou	se)				
			First, MI)		Date O	-	Gender		Relationship		FM Category
Name of a pe	erson not	residin	g with you:								
Phone:					F	Relationshi	p:				
Privacy A	ct										
I am aware t Family Housi of placement	he Privacy ng Office on the w	to relea	ase the informa	ation contained ent in a PPV h	d in this ap	plication to	o the Public F	rivat	l. I do hereby au e Venture Partne will be periodical	r (Pl	PV) for purposes
Signature of	Applicant:						Date:				

PPV FH APPLICANT STATEMENT OF UNDERSTANDING & CONTINUATION SHEET 1. My family is now living in Government or PPV housing? ☐ Yes ☐ No If yes, move-in date, location and address ______ 2. Have you ever resided in housing in Hampton Roads? ☐ Yes ☐ No If yes, move-out date and address _____ 3. Addition to my family is expected. \Box Yes \Box No (HSC requires a doctor's written statement with the estimated due date of birth. Single service women must provide a BAH chit and pregnancy statement from doctor to include estimated due date.) 4. Are you enrolled in the Exceptional Family Member Program? ☐ Yes ☐ No If yes, category # _____ (ONLY Navy has a category #, all other branches need to submit EFM letter) Do you have any special requirements? (i.e. single level, ramp, etc.) 5. Are you currently in a lease? □ Yes □ No If yes, lease expiration date ______ Address _____ If yes, is your lease with a Rental Partnership Program (RPP) Complex? □ Yes □ No If no where are you staying? (family/friend/hotel, etc.) _____ 6. Do you have a pet? ☐ Yes ☐ No **Two** pets (dogs/cats) **LIMIT**. Residents may not keep or permit the following dog breeds in Housing: Chows, Doberman Pinschers, Presa Canarios, Pit Bulls (American Pit Bull Terrier, American Staffordshire Terrier, Staffordshire Bull Terrier), Rottweiler's, any Wolf Hybrid, or any mix of the aforementioned breeds. Pet #1: Type: _____ Breed: _____ Pet #2: Type: _____ Breed: ____ Note: Barnyard or exotic pets (reptiles, ducks, rabbits, chickens, ferrets, pigs, etc.) are **NOT ALLOWED** in housing. 7. When do you need housing? _____ 9. If my spouse signs a lease in my absence, he/she MUST have both a General POA and Special POA that states: "The individual has the authority to start, change, or stop an allotment on behalf of the service member." Without this statement in the Special POA, alternative payment arrangements must be made. 10. The waiting times for housing are only estimates and are subject to change. 11. Housing may not be immediately available. Waiting times begin upon detachment from the previous command, if service member applies within 30 days of reporting date. 12. Service member must be in receipt of Basic Allowance for Housing (BAH) or a statement on command letterhead stating when the BAH will start before they can be offered housing.

13. Dual Military Couples and Single Sailors, who occupy full BAH properties, will be charged rent at the BAH with dependent rate of the higher ranking service member.					
14. I must have six months or more remaining on my Projected Rotation Date (PRD) and End of Active Obligated Service (EAOS) to be assigned housing.					
15. Service members who have joint legal and physical custody of dependent child for at least six months will be considered for appropriate bedroom eligibility. Member must provide proof of custody, i.e., divorce decree showing custody.					
16. An unmarried dependent child under 23 years of age who is enrolled full-time (i.e. \geq 12 hours course load) in an institution of higher learning, will be counted as a family member when determining bedroom eligibility, provided the child will be residing with the sponsor six months a year.					
17. Wounded Warriors have priority for single family and single level homes.					
18. Weapons in housing for all residents over 18 living in on-base housing MUST complete DD Form 2760 and submit to base security before any weapon may be brought into housing. Ref: COMNAVREGMIDLANTINST 5820.2.					
19. I am required to keep the Housing advised of any changes to my application (i.e. lease or Rental Partnership Program expiration, rate/rank, family members, address, phone numbers, email address, etc.). I am required to provide housing with advance notice that I am unable to accept housing until a specific date.					
20. I understand that when offered housing; I have 24 hours to accept or to decline. If I do not respond within 24 hours the home will be considered declined and released to the next available applicant.					
21. Any termination of existing off-base housing arrangements, including negotiations regarding a lease, is your responsibility. Those agreements should be made ONLY after given a firm-move-in date by the PPV partner. Moving into housing does not constitute the dissolution of a rental lease.					
22. I understand that if I accept and sign a lease and then cancel before occupying housing, I will be PERMANENTL Y removed from the waiting list.					
23. Housing Service Center counselors are your advocates in dealing with landlord/tenant issues whether you are living in PPV housing or community housing.					
24. I understand the Resident Energy Conservation Program (RECP) is aligned with the DON energy conservation initiative to reduce the amount of utilities consumed in PPV housing. This program transfers some responsibility for utilities costs from the PPV partnership to the residents. It accomplishes this by charging the residents for usage above the levels deemed to be normal for their location and housing type, by rewarding residents for conserving utilities, by issuing rebates to them when their utilities consumption is below certain target levels. Since the resident's BAH is intended to cover rent and "normal" utilities, the resident is only obligated to make out-of-pocket payments when actual usage exceeds the amount determined to be the "norm."					
CERTIFICATION: I certify that the information provided on this application is true and I understand that providing false information can result in immediate eviction from quarters and is punishable under Article 15 of the Uniformed Code of Military Justice (UCMJ).					
Signature					

Print Name

SEX OFFENDER POLICY ACKNOWLEDGEMENT & DISCLOSURE

PRIVACY ACT STATEMENT

Authority: 10 U.S.C. § 5013, 10 U.S.C. § 5041, 10 U.S.C. § 2831, DoD 4165.63-M and E.O. 9397.

Principle Purposes: To determine an individual's eligibility for Navy housing; including privatized housing.

Routine Uses: Used by region and installation housing office personnel to determine eligibility for Navy housing and by private partners who operate privatized Navy housing for management and operational purposes.

Disclosure: Voluntary; however, failure to provide the requested information may impact eligibility for Navy housing, including privatized housing.

POLICY STATEMENT: In accordance with OPNAVINST 1752.3, to the maximum extent permitted by law or otherwise waived by Commander, Navy Installations Command or the Chief of Naval Personnel (CNP), sex offenders are to be identified & prohibited from accessing Navy facilities and occupying Navy owned, leased, or PPV housing.

Sex Offender Definition: Any person convicted of a criminal offense requiring registration per the National Guidelines for Sex Offender Registration and Notification Act (SORNA) (42 U.S.C. §§ 16901-16962).

Sex Offender Registration and Notification Act (SORNA) (42 U.S.C. §§ 16901-16962).					
NOTICE OF REQUIREMENT TO DISCLOSE					
Military sponsors requesting assignment to Navy owned, leased or privatized housing are required to sign this acknowledgment and disclosure form.					
2. Occupancy of Navy owned, leased or privatized housing will not be approved for otherwise eligible applicants if the applicant, any authorized dependent, or live-in aide residing in the home is a sex offender.					
3. Anyone discovered to be a sex offender in the application process shall be denied access to Navy owned, leased or privatized housing.					
4. Anyone found to be a sex offender after taking occupancy may lose the privilege owned, leased or privatized housing, may be barred from the installation, and/or may occurs you may be responsible for all relocation expenses.					
5. The Installation or Region Housing Program Director will immediately forward information regarding identified sex offenders to the Installation N3, N9 and supports SJA/OGC offices, to include a copy of the applicant's DD 1746 and this form. All information will be forwarded to CNIC within two working days.					
6. Anyone found to have falsely certified this Acknowledgment shall be referred for barment or eviction, as appropriate, and may be responsible for relocation expenses.					
7. Denial of an application for assignment to Navy owned, leased or privatized housing under the applicable policy, may be appealed to the Region Commander via the military sponsor's chain of command.					
CERTIFICATION: I have read and understand the above policy. By my signature below, I certify that under a penalty of administrative action and/or prosecution for making a false official statement in violation of 18 U.S.C § 1001 and/or the Uniform Code of Military Justice, Article 107, that neither I nor any person living in my household is a registered/convicted sex offender. I understand that I am required to notify the Navy's Housing Office and the Installation Security Office immediately if circumstances change so that this certification is no longer true.					
Signature	Date				
Print Name	Command				

CNIC 11103/1 02/11 Adobe 8.0

COURTESY MOVE ENTITLEMENT				
POLICY STATEMENT: In accordance with CNICINST 11103.12 Navy Housing and Intra-Station Moves to qualify for a courtesy move you must meet the following:				
ELIGI	BILITY			
Member is eligible for courtesy move when member receives PCS orders and applies for Private Public Venture (PPV) housing within 30 days of reporting to his/her initial command in the Hampton Roads area and PPV housing is not available.				
Member is not eligible (bachelor) for PPV housing when PCS to Hampton Roads area but becomes eligible due to change from member with no dependents to member with dependents. Member must apply for PPV housing within 30 days of change of status to be eligible for courtesy move.				
Member is not eligible for a courtesy move from one loc	al PPV housing to another local PPV housing.			
Member is eligible when he/she receives notice of landlo	rd foreclosure.			
FORFEITS	ELIGIBILITY			
Member fails to apply for PPV housing within 30 days of	eport date to Hampton Roads command.			
Member fails to apply for PPV housing within 30 days of becoming eligible (i.e. marriage/pregnancy.)				
Member is referred to Lincoln Military Housing for housing	ng and is offered a home and turns down the home.			
I agree to pay all charges in connection with this move, if I fail to notify Personal Property Shipping Office of any change in plans prior to contractor pick-up or delivery date. Desired pick-up date is after key pick-up date.				
CERTIFICATION: I have read and understand the above p if I am not entitled to a courtesy move and when eligibility	olicy. I understand I am responsible for moving expenses y has been forfeited.			
Signature	Date			
Print Name				
OFFICE USE ONLY				
Report Date:	Application Date:			

Revised 01/2015