

# 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	LittleCreek_Housing@us.navy.mil	757-462-1244
NAS Oceana, Virginia Beach	757-433-3268	Oceana_Housing@us.navy.mil	757-433-3310
NSA-Hampton Roads, Norfolk Northwest Annex, Chesapeake	757-445-2832	HamptonRoads_Housing@us.navy.mil	757-445-6935
NAVSTA Norfolk NNSY, Portsmouth	757-445-2832	Norfolk_Housing@us.navy.mil Portsmouth_VA_Housing@us.navy.mil	757-444-1544
NWS Yorktown	757-847-7806	Yorktown_Housing@us.navy.mil	757-847-7822

## SUBJ: PPV Housing Application Package

Please check documents included:

- \_\_\_ **Public Private Venture (PPV) Family Housing (FH) Application**
- \_\_\_ **PPV FH Applicant Statement of Understanding and Continuation Sheet**
- \_\_\_ **Sex Offender Policy Acknowledgement & Disclosure 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
- \_\_\_ **Exceptional Family Member Program (EFMP)** – Provide EFMP letter
- \_\_\_ **Power of Attorney** - Required if spouse or designated representative is completing application.
- \_\_\_ **Information Release Form**

APPLICATION FOR ASSIGNMENT TO HOUSING <small>(Before completing form, read Privacy Act Statement and Instructions on reverse)</small>					1. TYPE SERVICE DESIRED <small>(X one or both)</small>	
					a. MILITARY HOUSING	b. HOUSING REFERRAL
SECTION I - APPLICANT INFORMATION						
2. NAME OF SPONSOR <small>(Last, First, Middle Initial)</small>			3. PAY GRADE	4. SSN	5. DOD COMPONENT	
6. ADDRESS <small>(Street, City, State, Zip Code)</small>			7. TELEPHONE NUMBER		8. STATUS OF APPLICANT <small>(X one)</small>	
			a. HOME <small>(Area Code)</small>	b. DUTY <small>(DSN)</small>	a. MILITARY MEMBER	c. CIVILIAN
					b. MILITARY SPOUSE	d. FOREIGN NATIONAL
			9. MARITAL STATUS	10. I AM SEPARATED FROM MY DEPENDENTS <small>(X one)</small>		
				a. VOLUNTARILY	b. INVOLUNTARILY	
11. I REQUEST HOUSING FOR <small>(X one)</small>				SECTION II - MILITARY CAREER INFORMATION <small>(Civilians skip to Item 15.)</small>		
a. SELF ONLY		b. SELF AND DEPENDENTS		14. DATES <small>(Enter in YYMMDD order)</small>	MILITARY APPLICANT	MILITARY SPOUSE
12. INSTALLATION/ORGANIZATION TRANSFERRED FROM				a. EFFECTIVE RANK/RATE DATE		
				b. ACTIVE DUTY SERVICE COMPUTATION		
				c. TIME REMAINING ON ACTIVE DUTY		
13. INSTALLATION/ORGANIZATION TRANSFERRED TO				d. EFFECTIVE CHANGE IN DUTY STATION		
				e. REPORT DATE		
				f. ESTIMATED FAMILY ARRIVAL DATE		
SECTION III - DEPENDENT DATA						
15. DEPENDENTS RESIDING WITH ME <small>(If more space is needed, continue on plain paper.)</small>						
a. NAME <small>(Last, First, Middle Initial)</small>		b. DATE OF BIRTH <small>(YYMMDD)</small>	c. SEX	d. RELATIONSHIP	e. REMARKS <small>(Handicap, health problems, expected additions to family, etc.)</small>	
SECTION IV - HOUSING DATA						
16. COMMUNITY HOUSING DESIRED <small>(X as applicable)</small>						
a. PURCHASE HOUSE		d. RENT HOUSE		g. RENT MOBILE HOME SPACE		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		l. TRANSIENT
17. AMENITIES DESIRED <small>(X as applicable. Write number in d. and e.)</small>				18. DATE HOUSING NEEDED <small>(YYMMDD)</small>		19. PRICE RANGE <small>(Community Housing)</small>
a. FURNISHED		e. NO. BATHS	20. LOCATION PREFERENCE <small>(Community Housing)</small>			
b. UNFURNISHED		f. PETS <small>(Allowed)</small>				
c. AIR CONDITIONING		g. OTHER <small>(Explain)</small>				
d. NO. BEDROOMS						
21. REMARKS						
22. SIGNATURE OF APPLICANT					23. DATE SUBMITTED <small>(YYMMDD)</small>	
SECTION V - DISPOSITION <small>(To be completed by the Housing Office.)</small>						
24. MILITARY HOUSING						
a. APPLICATION RECEIVED <small>(YYMMDD and time)</small>	b. APPLICATION EFFECTIVE <small>(YYMMDD)</small>		c. DD FORM 1747 PROVIDED <small>(YYMMDD)</small>		d. HOUSING AVAILABILITY <small>(Boxes indicated on DD Form 1747)</small>	
e. APPLICANT PLACED ON WAITING LIST	f. EFFECTIVE PLACEMENT <small>(YYMMDD)</small>		g. BEDROOMS REQUIRED		h. DATE UNIT ASSIGNED <small>(YYMMDD)</small>	
SECTION VI - HOUSING REFERRAL CERTIFICATE						
On this date I have received a listing of the housing restrictions approved by the Installation Commander, and I will not reside in any property on the restricted list. I have been briefed on (1) the services provided by the Housing Office, (2) the DoD program on equal opportunity for military personnel in off-base housing, and (3) nondiscrimination based on physical or mental handicaps.				In addition, if any facility refuses to rent or sell to me or I have reason to believe I am being discriminated against, I will promptly notify the Housing Office.		
				25. SIGNATURE OF APPLICANT		26. DATE SIGNED <small>(YYMMDD)</small>

## 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*).

- Enter the date your current rate/rank was effective.
- Enter your active duty service computation date.
- Enter the time (*in months*) that you have remaining on active duty.
- 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.
- Enter your official report date (*from your PCS orders*).
- 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

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

**COMMANDER, NAVY INSTALLATIONS COMMAND  
SEX OFFENDER POLICY ACKNOWLEDGEMENT & DISCLOSURE**

**Privacy Act Statement**

Authority: 10 U.S.C. § 5013; 10 U.S.C. § 5041; 10 U.S.C. § 2831; 10 U.S.C. 113, Secretary of Defense; DoD 4165.63-M, DoD Housing Management; DoD Directive 1000.25, DoD Personnel Identity Protection (PIP) Program; DoD Instruction 5200.08, Security of DoD Installations and Resources and the DoD Physical Security Review Board (PSRB); DoD 5200.08-R, Physical Security Program; DoD Directive 5200.27, Acquisition of Information Concerning Persons and Organizations not Affiliated with the Department of Defense (Exception to policy memos); Directive-Type Memorandum (DTM) 09-012, Interim Policy Guidance for DoD Physical Access Control; DTM 14-005, DoD Identity Management Capability Enterprise Services Application (IMESA) Access to FBI National Crime Information Center (NCIC) Files; and E.O. 9397 (SSN), as amended. System of Records Notice DMDC 16 DoD, Identity Management Engine for Security and Analysis (IMESA); 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).

**NOTICE OF REQUIREMENT TO DISCLOSE**

INITIAL

- |  |  |
|--|--|
| 1. 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 of residing in Navy owned, leased, or privatized housing, may be barred from the installation, and/or may be evicted. If eviction 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.

\_\_\_\_\_  
Print Name

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

Command

## PPV HOUSING STATEMENT OF UNDERSTANDING

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 Family Housing in Hampton Roads? ☐ Yes ☐ No

If yes, move-out date and address \_\_\_\_\_

3. Addition to my family is expected. ☐ Yes ☐ 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 \_\_\_\_\_

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: \_\_\_\_\_ Weight: \_\_\_\_\_ ESA? ☐ Yes ☐ No

Pet #2: Type: \_\_\_\_\_ Breed: \_\_\_\_\_ Weight: \_\_\_\_\_ ESA? ☐ Yes ☐ No

Note: Barnyard or exotic pets (reptiles, ducks, rabbits, chickens, ferrets, pigs, etc.) are **NOT ALLOWED** in housing.

7. **When do you need housing?** \_\_\_\_\_

8. **Housing Installation Wait List:** \_\_\_\_\_

EFMP Category 4 or 5 – If selecting a specific community, you will not receive priority placement per CNIC M-11103.1.

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 or 50 percent of the time, will be considered for appropriate bedroom eligibility. Service Members must provide proof of custody. Legal proof of custody is a divorce decree or court issued paperwork.	
16. An unmarried dependent child under 23 years of age who is enrolled full-time (i.e. course load of 12 hours or more) 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. All residents with weapons living in housing <b>MUST</b> complete DD Form 2760 and submit to Base Security before any weapon may be brought into housing. This form <b>MUST be updated yearly with Base Security</b> . 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. If an applicant opts to change from one wait list to another 30 or more days after the report date, the date the requested change is approved becomes the new control date to be used to establish the customer's position on the new list. The original control date established at the time of PCS move is no longer germane.	
21. 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.	
22. I understand that I will not be eligible to reapply for larger quarters if I accept smaller quarters then those to which I am entitled unless my current family composition changes. (Note: No more than two children shall share a bedroom)	
23. If a second offer of adequate housing is declined, the Service Members name will be placed at the bottom of the <b>Priority 2</b> Wait List	
24. Any termination of existing off-base housing arrangements, including negotiations regarding a lease, is your responsibility. Those agreements should be made <b>ONLY</b> after given a firm-move-in date by the PPV partner. Moving into housing does not constitute the dissolution of a rental lease.	
25. I understand that if I accept and sign a lease and then cancel before occupying housing, I will be <b>PERMANENTLY</b> removed from the waiting list.	
26. Housing Service Center counselors are your advocates in dealing with landlord/tenant issues whether you are living in PPV housing or community housing.	
<p>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).</p>	
Signature	<input type="text"/>
Print Name	<input type="text"/>
Date	<input type="text"/>

# 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:

## ELIGIBILITY

You **are eligible** for a courtesy move when you receive PCS orders and apply for Private Public Venture (PPV) Family Housing within 30 days of reporting to your initial command in the Hampton Roads area and PPV Family Housing is not available.

You **are not eligible (bachelor)** for PPV Family Housing when you PCS to the Hampton Roads area, but become eligible due to change from **member with no dependents** to **member with dependents**. You must apply for PPV Family Housing within 30 days of the change in status to be eligible for a courtesy move.

You **are not eligible** for a courtesy move from one local PPV Family Housing to another local PPV Family Housing.

You **are eligible** when you receive a notice of landlord foreclosure.

## FORFEIT ELIGIBILITY

You **forfeit eligibility** if you fail to apply for PPV Family Housing within 30 days of report date to a Hampton Roads command.

You **forfeit eligibility** if you fail to apply for PPV Family Housing within 30 days of becoming eligible (i.e. marriage/pregnancy.)

You **forfeit eligibility** if you are referred to Liberty Military Housing for housing and are offered a home and turn 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 policy. I understand I am responsible for moving expenses if I am not entitled to a courtesy move and when eligibility has been forfeited.

Signature

Date

Print Name

## OFFICE USE ONLY

Report Date:

Application Date:



INSTALLATION: \_\_\_\_\_  
PHONE: \_\_\_\_\_  
FAX: \_\_\_\_\_  
EMAIL: \_\_\_\_\_  
WEBSITE: \_\_\_\_\_

# Information Release Form

☐ I, \_\_\_\_\_ (Service member) give permission for the Navy Housing Service Center to share my contact and housing information, including PII, with \_\_\_\_\_ (the privatization partner) at \_\_\_\_\_ (installation).

☐ I, \_\_\_\_\_ (Service member) DO NOT give permission for the Navy Housing Service Center to share my contact and housing information, including PII, with \_\_\_\_\_ (the privatization partner) at \_\_\_\_\_ (installation) for the following reasons:  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Service Member Name: \_\_\_\_\_

X

Service Member Signature

Date

## FOR OFFICE USE ONLY

If not completed in person:

Permission received: ☐ Over the Phone ☐ By Email ☐ Other: \_\_\_\_\_

Counselor Name: \_\_\_\_\_

X

Counselor Signature

Date

**Contact Your Local Housing Service Center**  
[www.cnic.navy.mil/contacthousing](http://www.cnic.navy.mil/contacthousing)