HOUSING APPLICATION CONTINUATION SHEET

| Check YES or NO to the following | questions: | |
|--|---------------------------------|--|
| Are you presently in Military Hou | sing? Yes No | |
| Have you ever resided in Military If yes, date vacated and address_ | | |
| | (es 🗌 No 🛛 If yes, please | Member Program. Wounded Warrior, Key provide supporting documentation. Only |
| Do you have any special requirem | nents? (i.e. single level, ramp | o, etc.) |
| Are you currently in a lease? If yes, date expires If no, where are you staying? (i.e. | | |
| When do you need housing in Fal | llon? | |
| Do you have a pet? Yes Yes Neach pet and date of last rabies | | te the information below. NOTE: Photos of nove in. |
| Pet #1: | | |
| Pet Name: | Туре: | Breed: |
| Weight: | Age: | Color: |
| Pet #2: | | |
| Pet Name: | Туре: | Breed: |
| Weight: | Age: | Color: |
| NOTE: Barnyard or exotic pets (re | eptiles, ducks, rabbits, chicke | ns, ferrets, pigs, etc.) are NOT ALLOWED |

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

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.

Service Member Printed Name

Service Member Signature