



NAS Fallon Unaccompanied Housing (UH) Application Package

UH Application Required Documentation:

- ✓ DD1746 Application for Assignment to Housing
 - **Box 4 DoD ID Number ONLY**
 - **Box 21 Include Personal Email**
- ✓ Current Leave Earning Statement (LES)
- ✓ Sex Offender Policy Acknowledgment and Disclosure
- ✓ Permanent Change of Station (PCS) orders to Fallon
- ✓ Dependency Paperwork
 - Navy – NAVPERS 1070/602 (referred to as a RED/DA or PG2)
 - Marine Corps – NAVMC 10922
 - Air Force and Army – DD Form 93

Single Sailor Special Requests & Geographical Bachelors Additional Documentation:

- ✓ Supporting Documents based on request
- ✓ Special requests require First Endorsement letter from their command.
- ✓ GEO Requests - Section 3: Gaining Command Endorsement
- ✓ Fleet & Family Personal Finance Manager (775) 426-3333

Housing Instructions/References:

- ✓ NASFINST 11103.3E Geographic Bachelor Berthing Policy 18 JAN 2024
- ✓ NASFINST 72201A Policy and Procedures for Authorizing BAH 14 MAY 2024
- ✓ NAVADMIN 192/24 Basic Allowance for Housing Flexibility 01 OCT 2024)

EMAIL APPLICATION PACKAGES TO:

FALLON_HOUSING@US.NAVY.MIL OR FAX TO: (775) 426-2910

Navy Housing UH Office

Mon-Fri 0730-1600

Office Phone: (775) 426-3270

RA Phone: (775) 848-6750

Navy Housing Service Center

Mon-Fri 0730-1600

Main Office: 775-426-2809

UH HOUSING INTAKE SHEET

Section 1: APPLICANT INFORMATION

Name:	DoD ID No.:
Rate / Rank	Personal Email:
PRD:	Cell:
EAOS:	DOB:
Duty Type: Ship Shore	Gender: Male Female

Section 2: CHAIN OF COMMAND

Section 3: EMERGENCY CONTACT:

Command:	Name:
UIC:	Relationship:
LPO:	Phone:
Work Ext.:	Email:

Section 4: VEHICLE/BYCYCLE INFORMATION

Type/Make/Model	Type/Make/Model
Color	Color
License Plate No.	License Plate No.
State Issued:	State Issued:

For Navy Housing Office Use

DD Form 1746	YES NO	Control Date	/ /
Orders	YES NO	Members Letter of Explanation	YES NO
Dependent Data Sheet	YES NO	Member is Priority	1 2 3 4
Sex Offender Policy Acknowledgement & Disclosure Privacy Act Statement	YES NO	Family Housing Waitlist	YES NO
Orientation Completed	/ /	Qualification Letter to Member	/ /
LES	YES NO	ICO Approval Date	/ /
Work Shift		Next Review / Expiration Date	/ /

Notes/Special Requests:

APPLICATION FOR ASSIGNMENT TO HOUSING <small>(Before completing form, read Privacy Act Statement and Instructions on reverse)</small>				1. TYPE SERVICE DESIRED <i>(X one or both)</i>	
				a. MILITARY HOUSING	b. HOUSING REFERRAL
SECTION I - APPLICANT INFORMATION					
2. NAME OF SPONSOR <i>(Last, First, Middle Initial)</i>		3. PAY GRADE	4. SSN	5. DOD COMPONENT	
6. ADDRESS <i>(Street, City, State, Zip Code)</i>		7. TELEPHONE NUMBER		8. STATUS OF APPLICANT <i>(X one)</i>	
		a. HOME <i>(Area Code)</i>	b. DUTY <i>(DSN)</i>	a. MILITARY MEMBER	c. CIVILIAN
		9. MARITAL STATUS		10. I AM SEPARATED FROM MY DEPENDENTS <i>(X one)</i>	
		a. VOLUNTARILY		b. INVOLUNTARILY	
11. I REQUEST HOUSING FOR <i>(X one)</i>			SECTION II - MILITARY CAREER INFORMATION <i>(Civilians skip to Item 15.)</i>		
a. SELF ONLY			b. SELF AND DEPENDENTS		
12. INSTALLATION/ORGANIZATION TRANSFERRED FROM			14. DATES <i>(Enter in YYMMDD order)</i>		MILITARY APPLICANT
			a. EFFECTIVE RANK/RATE DATE		
			b. ACTIVE DUTY SERVICE COMPUTATION		
13. INSTALLATION/ORGANIZATION TRANSFERRED TO			c. TIME REMAINING ON ACTIVE DUTY		
			d. EFFECTIVE CHANGE IN DUTY STATION		
			e. REPORT DATE		
			f. ESTIMATED FAMILY ARRIVAL DATE		
SECTION III - DEPENDENT DATA					
15. DEPENDENTS RESIDING WITH ME <i>(If more space is needed, continue on plain paper.)</i>					
a. NAME <i>(Last, First, Middle Initial)</i>		b. DATE OF BIRTH <i>(YYMMDD)</i>	c. SEX	d. RELATIONSHIP	e. REMARKS <i>(Handicap, health problems, expected additions to family, etc.)</i>
			M F		
			M F		
			M F		
			M F		
			M F		
SECTION IV - HOUSING DATA					
16. COMMUNITY HOUSING DESIRED <i>(X as applicable)</i>					
a. PURCHASE HOUSE		d. RENT HOUSE		g. RENT MOBILE HOME SPACE	
b. PURCHASE CONDOMINIUM		e. RENT APARTMENT		h. SHARE	
c. PURCHASE MOBILE HOME		f. RENT MOBILE HOME		i. RENT ROOM	
17. AMENITIES DESIRED <i>(X as applicable. Write number in d. and e.)</i>			18. DATE HOUSING NEEDED <i>(YYMMDD)</i>		19. PRICE RANGE <i>(Community Housing)</i>
a. FURNISHED			e. NO. BATHS		
b. UNFURNISHED			f. PETS <i>(Allowed)</i>		
c. AIR CONDITIONING			g. OTHER <i>(Explain)</i>		
d. NO. BEDROOMS			20. LOCATION PREFERENCE <i>(Community Housing)</i>		
21. REMARKS					
22. SIGNATURE OF APPLICANT					23. DATE SUBMITTED <i>(YYMMDD)</i>
SECTION V - DISPOSITION <i>(To be completed by the Housing Office.)</i>					
24. MILITARY HOUSING					
a. APPLICATION RECEIVED <i>(YYMMDD and time)</i>		b. APPLICATION EFFECTIVE <i>(YYMMDD)</i>		c. DD FORM 1747 PROVIDED <i>(YYMMDD)</i>	
d. HOUSING AVAILABILITY <i>(Boxes indicated on DD Form 1747)</i>		e. APPLICANT PLACED ON WAITING LIST		f. EFFECTIVE PLACEMENT <i>(YYMMDD)</i>	
		g. BEDROOMS REQUIRED		h. DATE UNIT ASSIGNED <i>(YYMMDD)</i>	
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		

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

Unaccompanied Housing (UH) Information

- Orientation is completed upon arrival.
 - In the event arrival was after hours new residents are to complete the move process with the UH Managers office on the next working day.
- Command staff conduct monthly room inspections.
 - The Navy Housing Service Center generates inspection sheets and randomly assigns tenant commands to inspect. Rooms that fail inspection will be re-inspected by resident's command.
- UH staff and RA's also conduct room inspections that may or may not be announced.
- Day sleeper chits are available to those that are on second, third or rotational shifts.
 - Chits require LCPO signature as well as UH Manager and must be posted on resident door. This ensures inspection are conducted on or after 1400.
- Report maintenance concerns immediately.
- Tampering with smoke detectors in UH buildings is prohibited.
- Operating a business within UH is prohibited (e.g. barber).
- Appropriate clothing must be worn in and around UH buildings at all times.
- Smoking is prohibited in UH buildings, and stairwells; to include vaping.
- Underage consumption and possession of alcohol is prohibited; must be 21 years of age or older. Alcohol must be secured if roommate is not of legal drinking age.
- The lounge is open to residents:
 - Sun. – Thur. 0800-2200 & Fri. – Sat. 0800-Midnight. Users are responsible for cleaning and emptying the trash after use.
- Visitors are permitted only during the following hours:
 - Sunday-Thursday: 0800-2300; Friday-Saturday: 0800-Midnight; **No overnight guests, no exceptions.** Residents are to always accompany visitors and are responsible for their conduct and actions. If a guest is found within UH and without Sponsor base security will be notified.
- Residents may not use unassigned beds, closets or lockers.
- Prohibited items:
 - Open flames of any kind (e.g. candles, incents), flushable wipes, liquor bottles over 750ML.
These items will be confiscated
- Room changes must be approved by UH Manager.
- With the exception of guide dogs for the visually impaired and military working dogs in law enforcement capacity, all pets are prohibited.
- Personal weapons must be registered with and stored at security.
- A pre and final inspection are required before departing UH.
- Please notify UH Manager of upcoming deployments, TDY or Leave.