

NAVY FAMILY HOUSING ASSESSMENT PACKAGE

Submit your complete assessment package via fax: 619-556-8012 or
email: web.housing@navy.mil

SERVICE MEMBER LAST NAME:		SERVICE MEMBER FIRST NAME:		MI
PAY GRADE:	BRANCH OF SERVICE:	OFFICIAL EMAIL ADDRESS:	DATE HOUSING NEEDED:	

CHECK ITEMS THAT APPLY:

ROUTINE PCS ORDERS
HUMANITARIAN ORDERS

PRE-COMMISSIONED SHIP
INTERSITE RELOCATION

HOMEPORT CHANGE*
EFM PRIORITY HOUSING**

*** MUST PROVIDE HOMEPORT CHANGE CERTIFICATE**
**** MUST PROVIDE VERIFICATION/DESIGNATION LETTER**

Greetings,

Thank you for your interest in Navy Family Housing (FH), San Diego. If you are an active-duty service member with qualifying dependents assigned to Metro San Diego, you may be eligible. To slow the spread of COVID-19 and for Navy FH to determine your eligibility you must submit all the required paperwork with the attached document to the eligibility team at web.housing@navy.mil. Do not send an incomplete housing assessment.

A complete housing assessment package must contain the following:

1. Official Permanent Change of Station Orders – if your Projected Rotation Date (PRD) has expired or will expire in less than 6 months, you will be asked for additional documentation.
2. Official Dependency Paperwork – **All dependency paperwork must be current and officially signed/certified as requested for:**
 - All Navy Personnel must provide their **Official NAVPERS 1070/602 (usually 3-4 Pages)** do not submit a "Record of Emergency Data/Dependency Application."
 - USMC Personnel must provide their NAVMC 10922/RED or DD 1172-2 with Digital Signatures in Section III from Authorized Officials.
 - USA and USAF Personnel must provide their DD 1172-2 with Digital Signatures in Section III from Authorized Officials.
 - US Coast Guard Personnel must apply through Abbigail McCracken at abbigail.mccracken@uscg.mil or phone at 619-278-7221
3. Latest Leave and Earning Statement.
4. Service members and/or spouses who have joint legal and **primary physical** custody of dependent children for at least 6 months or greater than 50% of the time will be considered for appropriate bedroom eligibility. **Legal proof of custody is a divorce decree or court issued custody paperwork.**
5. Priority Assignment supporting documentation such as EFM letter; Wounded Warrior and/or K&E letters.
6. Proof of Pregnancy with estimated date of birth AND signed by a healthcare professional.
7. Dual Military Couples – Provide all documentation for both service members **REGARDLESS** of co-location status. (PCS orders and dependency paperwork)

COMMENTS:

FOR OFFICE USE ONLY

• EM-1 SENT EMH COUNSELOR _____ SIGNATURE _____ DATE _____

**NAVY FAMILY HOUSING
PRE-DETERMINATION SHEET**

Write Legibly

Service Member Information

Service Member Name: (Last, First, MI):		Gender:	DOB:	Complete SSN:	Cell Phone w/area code:
Service Branch:	Pay Grade:	Date of Rank:	Date you Joined the Military:	EAS/EAOS:	Date Hsg Needed:
Military E-Mail:		Personal E-Mail:		Remarks: (Pregnant, LIMDU, Frocked):	
San Diego Command:		UIC/RUC:	PRD:	Detach Date:	Report Date:

Spouse Information, if Married

Name: (Last, First, MI):		Gender:	DOB:	Complete SSN:	Cell Phone w/area code:
Date of Marriage:	Personal Email:		Will spouse reside in the home?		Remarks (EFM, Pregnant, etc.):

Military Spouse Career Information, if Applicable (use complete dates)

Service Branch:	Pay Grade:	Date of Rank:	Date you Joined the Military:	EAS/EAOS:	
Military E-Mail:		Are you Co-Located?		Do you have BAH?	
San Diego Command:		UIC/RUC:	PRD:	Detach Date:	Report Date:

Dependents Residing with Service Member (exclude spouse)

Legal Name (Last, First, MI)	Date of Birth	Age	Gender	Relationship	EFM

Agreement and Responsibilities (Initial the box to the left of each statement)

<input type="checkbox"/>	I am aware the Privacy Act of 1974 prohibits release of personal information without my approval. I do hereby authorize the Military Family Housing (FH) Office to release the information contained in this assessment package to the Public Private Venture Partner (PPV) for purposes of placement on the waiting list and placement in a PPV home. I am aware that my pay records will be periodically verified by FH and PPV staff for BAH purposes only.
<input type="checkbox"/>	I certify that the bona fide family members listed are acknowledged by the Department of Defense and will reside with me in government/privatization quarters for at least 6 consecutive months or more of each year. I further understand that I must keep the Family Housing Office informed of any changes in my status or family composition that could affect my eligibility for government/privatization quarters.
<input type="checkbox"/>	I understand the provisions about the transfer policy from one set of privatization quarters to another. I further understand that this will apply to this and future tours of duty in this area.
<input type="checkbox"/>	I certify that the information provided in this assessment package 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).
<input type="checkbox"/>	I authorize stoppage of BAH in order that quarters may be held for my occupancy beyond 30 days from the date that I am offered and accepted.
<input type="checkbox"/>	I fully understand that when I accept a PPV home, I forfeit my BAH entitlements, unless otherwise dictated by applicable regulations. I will continue to receive BAH when assigned to privatization, for rent payments of my chosen unit.

Privacy Act Statement AUTHORITY: 5 USC 301 Department Regulations PURPOSE AND USES: The principal purpose is to provide information on the requirement of military personnel for government/privatization quarters. The information is revised and filed in the Housing Office for use in assisting military personnel to obtain/maintain government/privatization quarters.

EFFECTS OF NONDISCLOSURE: Disclosure of this information is voluntary; however, nondisclosure would make it difficult, if not impossible, to assist an individual in obtaining government/privatization quarters.

I have carefully read and understand each item listed above. By signing below, I acknowledge and agree with each statement and condition included in the Agreement and Responsibilities and will fully comply with all such provisions.

Service Member Signature or a trusted agent with POA:	Date:
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FAMILY HOUSING ASSESSMENT CONTINUATION SHEET

Are you or your spouse currently residing in Military or PPV Family Housing? _____ If yes, Where _____
 Are you currently in a LOCAL community or RPP lease? _____ If yes, when does it expire? _____
 Date Housing Needed? _____ Site Preference: _____
 Are you eligible for priority housing? (i.e. Exceptional Family Member (EFM), Wounded Warrior (WW) or Key & Essential (K&E))? _____ If yes, supporting documentation **MUST** be included with your application. **EFM, WW, and K&E assignments are solely based on availability, medical needs and timeframe, not desired preference.**
Only one offer will be given under priority housing, if it is declined, you forfeit priority assignment.
 Do you have any special requirements associated with EFM and/or WW (i.e. single level, ramp, etc.)? _____

Animals in Navy Family Housing

Whether you own animals or not, read and initial the following statements

I understand only select sites allow animals and it is my responsibility to be aware of the sites animal policy and size restrictions **prior** to selecting a site. I understand any damages caused to the unit or grounds by my animal(s) are my responsibility. Barnyard or exotic animals (**reptiles, ducks, rabbits, chickens, ferrets, pigs, etc.**) are **NOT ALLOWED** in any site.

I understand residents may not keep or permit the following dog breeds in FH at **any** time: Chows, Doberman Pinschers, Presa Canarios, Pit Bulls (American Pit Bull Terrier, American Staffordshire Terrier, Staffordshire Bull Terrier), Rottweiler, any Wolf Hybrid, or any mix of the aforementioned breeds.

Do you have an animal (dog or cat)? _____ If yes, complete the information below. *ALL animals, including ESA or Service Animals will be reviewed by Lincoln Military Housing. You may be asked to provide photos, license and date of last rabies shots.*

Animal	Animals Name	Type (dog or cat)	Breed	Weight	Age	Color
#1						
#2						

COURTESY MOVES

Eligible

- Member is eligible for courtesy move when member receives PCS orders and applies for family housing within 30 days of reporting to his/her initial command in the San Diego area and housing is not available.
- Members not eligible (bachelor) for family housing when PCS to San Diego area but becomes eligible due to change from member with no dependents to member with dependents, member must apply for family housing within 30 days of change of status to be eligible for courtesy move.

Forfeits Eligibility

- Member fails to apply for family housing within 30 days of report date to San Diego Command.
- Member fails to apply for family housing within 30 days of becoming eligible (i.e. marriage/pregnancy).
- Member is referred to Lincoln Military Housing for housing, is offered a home and declines the home.
- Member's orders are non-funded.

This is to certify I have been briefed and understand the above. I understand I am responsible for moving expenses if I am not entitled to a courtesy move and when eligibility has been forfeited.

Emergency Point of Contact

Name of a person not residing with you:	Relationship	Phone number

How did you hear about us? Did a current resident refer you? If so, please provide their name, community, and phone number.

Service Member Printed Name and Signature

_____ Date

STATEMENT OF UNDERSTANDING

Please initial to the left of each statement	
	I understand that all of the contact information provided is accurate. Furthermore, I understand if the San Diego Housing Service Center personnel cannot leave a voice mail on the phone numbers provided or if the emails are no longer valid, my application will be cancelled.
	I understand if my spouse signs a lease in my absence, he/she MUST have a Power of Attorney that states: "The individual has the authority to accept and sign a lease for Military Family Housing and start, stop, or change an allotment on behalf of the service member."
	I understand I must have six months or more remaining on my San Diego tour of duty to be assigned Family Housing (FH).
	I understand Wounded Warriors have priority for single family and single level homes.
	I understand once I have accepted a home, I am removed from all waiting lists.
	After 30 days from application date, if I change my selected area, my new application control date will be effective the date of the change.
	I understand waiting times for Family Housing (FH) are estimates and subject to change.
	I understand and agree that it is my responsibility to provide the Housing Service Center (HSC) with any changes in duty station, family composition, contact information and paygrade.
	I understand FH may not be immediately available and wait times for FH are estimates and subject to change.
	I understand how my control date is determined, and my wait time begins upon detachment of my last permanent duty station. If applicable, I must provide my proof of detachment from my previous command 30 days from my reporting date to the ultimate duty station. If I change my selected area, my new control date will be modified.
	Dual Military families, who occupy full BAH properties, will be charged rent at the San Diego BAH with dependent rate of the higher-ranking service member.
	I understand I am eligible for TWO offers of housing (exclude priority assignment). There is no guarantee both offers will be made at the same time. I understand that I cannot specify a particular unit, street, or floor plan. If I decline both offers, I understand that my application will be cancelled, and I will need to reapply.
	I understand when offered housing; I have 24 hours to accept or to decline. I understand if I do not respond within 24 hours the home will be considered declined. If I am offered a home that is occupied or undergoing maintenance, I will not be permitted to view the interior of the home, and once I accept a home, I am removed from all waiting lists.
	I understand, I can decline military FH and may elect to live in the local community. I may request community rental listing by speaking to a Community Housing Representative
	I declare that I will only use the premises as a private residence for bona-fide family members and will not sublet any portion.
	If I elect to accept smaller quarters or quarters outside of my rank, I fully understand I will not be able to reapply for another site unless I have an increase in my family size and/or rank that change my eligibility.

Service Member Printed Name and Signature

Date

Office Use Only:

Site: _____ Est. Wait: _____ Waitlist Mgr: _____ (619-_____-_____) _____

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 (SSN)

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 and CNICINST 5009.5, 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 having 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, and may be required to pay all relocation expenses unless prohibited by law or otherwise waived by competent authority.	
5. The Installation or Region Housing Program Director will immediately forward information regarding identified sex offenders to the Installation N3, N9 and supporting OGC/FJA 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 barrment 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 Secretary of the Navy, 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 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



INSTALLATION: CNRSW N93 METRO San Diego
PHONE: (619)556-8443 FAX: (619)556-8012
EMAIL: web.housing@navy.mil
WEBSITE: https://sandiego.navylifsw.com/housing

Information Release Form

I, _____ (Service member) give permission for the Navy Housing Service Center to share my contact and housing information, including PII, with Lincoln Military Housing, San Diego CA (the privatization partner) at CNRSW, N93, Metro San Diego.

I, _____ (Service member) **DO NOT** give permission for the Navy Housing Service Center to share my contact and housing information, including PII, with Lincoln Military Housing, San Diego, CA (the privatization partner) at CNRSW, N93 Metro San Diego for the following reasons: _____

Service Member Signature: Date: _____

FOR OFFICE USE ONLY

If not completed in person:

Permission received: Over the Phone By Email Other: _____

Counselor Signature

Date

Contact Your Local Housing Service Center
www.cnic.navy.mil/contacthousing