

## FAMILY HOUSING COVER SHEET

Submit your complete application packet via fax: 619-556-8012  
or Email: [SanDiego\\_Housing@us.navy.mil](mailto:SanDiego_Housing@us.navy.mil)  
Information Desk: 619-556-8443

### CHECK ITEMS THAT APPLY:

☐  
☐

ROUTINE PCS ORDERS  
HUMANITARIAN ORDERS

☐  
☐

PRE-COMMISSIONED SHIP  
INTERSITE RELOCATION

☐  
☐

HOMEPORT CHANGE\*  
EFM CAT 4/5  
PRIORITY\*\*

\*MUST PROVIDE HOMEPORT CHANGE CERTIFICATE

\*\* MUST PROVIDE VERIFICATION/DESIGNATION LETTER

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. For Navy FH to determine your eligibility you must submit all the required paperwork with the attached document to the eligibility team at [SanDiego\\_Housing@us.navy.mil](mailto:SanDiego_Housing@us.navy.mil) **Do not send an incomplete housing application.**

A complete housing application packet must contain the following:

- **Official San Diego Permanent Change of Station Orders** – If your PRD and/or your EAOS has less than six months you must provide updated San Diego orders. Letters of Intent are for planning purposes only and not official orders.
- **Official Dependency Paperwork** – All dependency paperwork must be current and officially signed/certified as requested.
  - All **USN** Personnel must provide the Official NAVPERS 1070/602 that is approved with Digital Signatures in block 51 from Authorized Officials. Be advised if you submit dependency paperwork that is incomplete or erroneous your determination of eligibility will be delayed.
  - All **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.
  - **USCG** Personnel must obtain a DD-1747 from [the Coast Guard Office](#) or call 330-327-5079 **prior** to submitting your application packet.
- Latest Leave and Earning Statement
- Service members and/or spouses who have joint legal and primary physical custody of dependent children for at least six months or greater than 50% of the time will be considered for appropriate bedroom eligibility. **Legal** proof of custody is a finalized divorce decree or finalized court issued custody paperwork. There are no exceptions.
- Priority Assignment for Family Housing supporting documentation such as EFM letter and/or Wounded Warrior letter/orders.
- Proof of Pregnancy with estimated date of birth AND signed by a healthcare professional.
- Dual Military Couples – Provide all documentation for both service members REGARDLESS of co-location status. (PCS orders and dependency paperwork)
- Families in the midst of marital separation and/or divorce may not be eligible for Navy FH. Final determination is based on court issued custody documents provided.

\*\*\*\*\* Please include the following information in block 21 of the DD Form 1746 \*\*\*\*\*

- Service members official email as well personal email addresses
- Spouse's email address and phone number

mp 5/22/2025

# HOW TO FILL OUT THE DD FORM 1746

1. Military Housing 2. Name of the Service Member 3. Pay Grade (E1 – O10) 4. Full SSN # 5. USN, USMC, USCG, USA, USAF?

6. Current Address  
7a. Mobile Phone  
7b. Duty Phone, not necessary.

11. Self and Dependents  
12. Last Duty Station  
13. Next Duty Station

15. Add your Bona fide Dependents (Dependents must be in your Dependency Paperwork)

22. Service Member Signature (Must be digital or wet ink signature)

21. Service Member's Official Email and Personal Email, Spouse's Phone # and Personal Email.

8. Military Member  
9. Married or Single/ w Dependents

14a. Effective Rank Date.  
14b. Join date.  
14c. EAOS, EAS.  
14d. Detached date last command.  
14e. Report date next command.  
14f. Date PCSing to SD.

18. Date Housing Needed.  
20. Location Pref, choose from the Wait Times.

23. Date Submitted

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

<b>APPLICATION FOR ASSIGNMENT TO HOUSING</b> <small>(Before completing form, read Privacy Act Statement and Instructions on reverse)</small>				<b>1. TYPE SERVICE DESIRED</b> <i>(X one or both)</i>	
				<input type="checkbox"/> a. MILITARY HOUSING	<input type="checkbox"/> b. HOUSING REFERRAL
<b>SECTION I - APPLICANT INFORMATION</b>					
<b>2. NAME OF SPONSOR</b> <i>(Last, First, Middle Initial)</i>		<b>3. PAY GRADE</b>	<b>4. SSN</b>	<b>5. DOD COMPONENT</b>	
<b>6. ADDRESS</b> <i>(Street, City, State, Zip Code)</i>		<b>7. TELEPHONE NUMBER</b>		<b>8. STATUS OF APPLICANT</b> <i>(X one)</i>	
		a. HOME <i>(Area Code)</i>	b. DUTY <i>(DSN)</i>	<input type="checkbox"/> a. MILITARY MEMBER	<input type="checkbox"/> c. CIVILIAN
				<input type="checkbox"/> b. MILITARY SPOUSE	<input type="checkbox"/> d. FOREIGN NATIONAL
		<b>9. MARITAL STATUS</b>	<b>10. I AM SEPARATED FROM MY DEPENDENTS</b> <i>(X one)</i>		
				<input type="checkbox"/> a. VOLUNTARILY	<input type="checkbox"/> b. INVOLUNTARILY
<b>11. I REQUEST HOUSING FOR</b> <i>(X one)</i>			<b>SECTION II - MILITARY CAREER INFORMATION</b> <i>(Civilians skip to Item 15.)</i>		
<input type="checkbox"/> a. SELF ONLY	<input type="checkbox"/> b. SELF AND DEPENDENTS		<b>14. DATES</b> <i>(Enter in YYYYMMDD order)</i>		<input type="checkbox"/> MILITARY APPLICANT
<b>12. INSTALLATION/ORGANIZATION TRANSFERRED FROM</b>			a. EFFECTIVE RANK/RATE DATE		
			b. ACTIVE DUTY SERVICE COMPUTATION		
			c. TIME REMAINING ON ACTIVE DUTY		
<b>13. INSTALLATION/ORGANIZATION TRANSFERRED TO</b>			d. EFFECTIVE CHANGE IN DUTY STATION		
			e. REPORT DATE		
			f. ESTIMATED FAMILY ARRIVAL DATE		
<b>SECTION III - DEPENDENT DATA</b>					
<b>15. DEPENDENTS RESIDING WITH ME</b> <i>(If more space is needed, continue on plain paper.)</i>					
a. NAME <i>(Last, First, Middle Initial)</i>	b. DATE OF BIRTH <i>(YYYYMMDD)</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			
<b>SECTION IV - HOUSING DATA</b>					
<b>16. COMMUNITY HOUSING DESIRED</b> <i>(X as applicable)</i>					
<input type="checkbox"/> a. PURCHASE HOUSE	<input type="checkbox"/> d. RENT HOUSE	<input type="checkbox"/> g. RENT MOBILE HOME SPACE	<input type="checkbox"/> j. ROOM AND BOARD		
<input type="checkbox"/> b. PURCHASE CONDOMINIUM	<input type="checkbox"/> e. RENT APARTMENT	<input type="checkbox"/> h. SHARE	<input type="checkbox"/> k. SUBLET		
<input type="checkbox"/> c. PURCHASE MOBILE HOME	<input type="checkbox"/> f. RENT MOBILE HOME	<input type="checkbox"/> i. RENT ROOM	<input type="checkbox"/> l. TRANSIENT		
<b>17. AMENITIES DESIRED</b> <i>(X as applicable. Write number in d. and e.)</i>		<b>18. DATE HOUSING NEEDED</b> <i>(YYYYMMDD)</i>		<b>19. PRICE RANGE</b> <i>(Community Housing)</i>	
<input type="checkbox"/> a. FURNISHED	<input type="checkbox"/> e. NO. BATHS				
<input type="checkbox"/> b. UNFURNISHED	<input type="checkbox"/> f. PETS <i>(Allowed)</i>				
<input type="checkbox"/> c. AIR CONDITIONING	<input type="checkbox"/> g. OTHER <i>(Explain)</i>	<b>20. LOCATION PREFERENCE</b> <i>(Community Housing)</i>			
<input type="checkbox"/> d. NO. BEDROOMS					
<b>21. REMARKS</b>					
<b>22. SIGNATURE OF APPLICANT</b>				<b>23. DATE SUBMITTED</b> <i>(YYYYMMDD)</i>	
<b>SECTION V - DISPOSITION</b> <i>(To be completed by the Housing Office.)</i>					
<b>24. MILITARY HOUSING</b>					
a. APPLICATION RECEIVED <i>(YYYYMMDD and time)</i>	b. APPLICATION EFFECTIVE <i>(YYYYMMDD)</i>	c. DD FORM 1747 PROVIDED <i>(YYYYMMDD)</i>	d. HOUSING AVAILABILITY <i>(Boxes indicated on DD Form 1747)</i>		
e. APPLICANT PLACED ON WAITING LIST	f. EFFECTIVE PLACEMENT <i>(YYYYMMDD)</i>	g. BEDROOMS REQUIRED	h. DATE UNIT ASSIGNED <i>(YYYYMMDD)</i>		
<b>SECTION VI - HOUSING REFERRAL CERTIFICATE</b>					
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.		
			<b>25. SIGNATURE OF APPLICANT</b>		<b>26. DATE SIGNED</b> <i>(YYYYMMDD)</i>

**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



INSTALLATION: NAVBASE San Diego

PHONE: (619)556-8443 FAX: (619)556-8012

EMAIL: SanDiego\_Housing@us.navy.mil

## Information Release Form

I, \_\_\_\_\_ (Service member) give permission for the Navy Housing Service Center to share my contact and housing information, including PII, with Liberty Military Housing, San Diego CA (the privatization partner) at Navy Base 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 Liberty Military Housing, San Diego, CA (the privatization partner) at Navy Base 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

mp 4/25/2025

---

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