

HOUSING REQUEST COVER SHEET

REQUIRED DOCUMENTS FOR HOUSING REQUEST. ALL MUST BE SUBMITTED.

FORM

Housing Application _____

Registered Sex Offender Policy _____

Pet Addendum _____

Pet documentation/request form _____

Photo of each pet _____

Privacy Act release form _____

Copy of **Active Duty** Orders _____

OR

Reservists Letter from command stating in good standing _____

Government employees Employment Verification Letter _____

Retirees need to submit DD214 and retired letter _____

ADDITIONALS IF NOT IN DEERS

Marriage Certificate (if newly married) _____

Birth Certificate(s) of children (if not listed on DEERS) _____

Custody Paperwork (if applicable) _____

Pregnancy Verification Letter from Primary Care Manager (if applicable) _____

General or Specific Power of Attorney (if applicable) _____

Must state the following paragraph:

6. ...: to sign for and clear government or other housing in the best interests of my family members and in accordance with the law and military regulation.

Spouse must sign as follows:

"Military Member's Signature" POA "Spouses" Signature"

E-MAIL SMB_Stewart_Housing@usmc.mil

MAIL: MILITARY HOUSING OFFICE

46 Sluga Drive

PHONE 845-563-0587

New Windsor, NY 12553

FAX 845-787-5641

FOR HOUSING ONLY:

NAME: _____

MOVE IN DATE: _____

PRIORITY: _____

DATE REFERRED: _____

MUST SEE MHO: _____

REFERRED BY: _____

Military Housing Office
46 Sluga Drive, New Windsor NY 12553

For Official Use Only – Privacy Act Data
APPLICATION FOR HOUSING

SSN: _____ Application Date: _____ / _____ / _____
Month Day Year

Name: _____ Date of Birth: _____ / _____ / _____
Last First Middle Month Day Year

Pay Grade: _____ Date of Rank: _____ / _____ / _____ Gender: M F Marital Status: _____
Month Day Year (Circle One)

Service Branch: _____ Active Duty, Reservist, DOD Employee, Retiree

Cellular Telephone: (_____) _____ - _____ (Circle One)

Home Telephone: (_____) _____ - _____ Work Telephone: (_____) _____ - _____

Unit Email: _____ Home Email: _____

Current Unit/Organization: _____

Current Home Address or Location (If you are in transit): _____

Number & Street

City

State

Zip Code

Installation Transferring From: _____

Installation Transferring To: _____

Local Unit Assignment: _____

Estimated Report/Arrival Date: _____ / _____ / _____
Month Day Year

Family Arrival Date (If different from military sponsor): _____ / _____ / _____
Month Day Year

Estimated End of Tour Date: _____ / _____ / _____
Month Day Year

Are You Selected for Promotion? Yes No

When you joined the military _____ / _____ / _____
Month Day Year

What is your End of Active Service (EAS) Date? _____ / _____ / _____ or Indefinite
Month Day Year (Circle)

Do you have pets? Explain _____

DEPENDENT INFORMATION

Name	Gender	Date of Birth	Relationship to You
_____	_____	_____/_____/_____ Month Day Year	_____
_____	_____	_____/_____/_____ Month Day Year	_____
_____	_____	_____/_____/_____ Month Day Year	_____
_____	_____	_____/_____/_____ Month Day Year	_____

Will the number of dependents you are responsible for change in the next 3 – 12 months? Yes No

Do you have a family member enrolled in the EFMP? Yes No

If yes, what are your EFMP requirements? _____

How did you hear about Stewart Housing? _____

Signature: _____ Date: _____ / _____ / _____

MILITARY SPOUSE DATA

Name: _____ Pay Grade: _____ SSN: _____ - _____ - _____
Last First Middle

Date of Rank: _____ / _____ / _____ Service Branch: _____ Unit Assignment: _____

PRIVACY ACT STATEMENT: AUTHORITY 5 U.S.C. 301 & 44 U.S.C. 3101 (Executive Order 9397) SSN PRINCIPAL PURPOSE (S): This request for your private information, including social security number and personal history information, is made to assist our office in determining eligibility for services, compliance with state and federal law, and related purposes.

ROUTINE USE (S): Information provided is used to assign personnel to housing, perform necessary background checks, and for other lawful purposes.

MANDATORY/VOLUNTARY DISCLOSURE CONSEQUENCES OF REFUSAL TO DISCLOSE: Disclosure of SSN and personal historical information is voluntary and there will be no adverse consequence from refusal to disclose. However, refusal to establish eligibility may preclude assignment to housing.

ADDENDUM TO HOUSING APPLICATION FORM DD 1746

Have you, or any member of your family for whom you seek authorized housing under this application, ever been charged with, convicted of, or pleaded no contest to any criminal charge related to a sexual offense?

Y N

Have you, or any member of your family for whom you seek authorized housing under this application, ever been required to register as a sex offender under the laws of the United States or any state?

Y N

Is any member of your family for whom you seek authorized housing under this application, a registered sex offender?

Y N

If you answered "Yes" to any of the above questions, please list dates, locations, violations & resolution. Provide all details of any requirements to register as a sex offender. Use reverse side if necessary.

CERTIFICATION OF APPLICANT

I hereby certify that all responses contained herein are true and correct, and I understand that the omission of any material fact may result in denial of my application for housing, or eviction from housing if the omission is discovered after assignment.

Signature: _____

Date: _____

Printed Name: _____

Pet Addendum

Pet ownership for those service members and their families residing in government-owned or PPV family housing provides a real and tangible benefit, and contributes to Quality of Life for resident families. However, the rise in ownership of large dog breeds with a predisposition toward aggressive or dangerous behavior, coupled with the increased risk of tragic incidents involving these dogs, necessitates a uniform policy to provide for health, safety and tranquility of all residents of family housing areas.

On August 11, 2009 Headquarters Marine Corps issued a change to the Marine Corps Housing Order, MCO 11000.22, governing domestic animals in housing. The following breeds are now prohibited aboard Marine Corps installations. Pit Bulls, including American Staffordshire Terrier, Staffordshire Bull Terrier, Rottweilers and Canid/Wolf Hybrids, or any canine with dominant traits of aggression that present an unreasonable risk to the health and safety of personnel in family housing areas. **Consequently, full or mixed breeds of the above mentioned breeds are prohibited.** In the absence of formal breed identification a determination of "majority breed" will be made by a Veterinary Corps Officer (VCO) or a civilian veterinarian.

Service Animals: Animals trained for use by individuals with disabilities are permitted for use by the disabled individual.

As per HQMC Order MCO 11000.22 all dogs and cats aboard Marine Corps installations must be vaccinated and micro-chipped.

Dogs are also required to be licensed with the town as per New York State Law.

Applicant Signature: _____

Date: _____



From:

To: Housing Manager, U.S. Marine Corps, Family Housing, Stewart Terrace

Subj: **PET AUTHORIZATION/REGISTRATION REQUEST**

1. I request permission to maintain a pet within my quarters. I understand that I must comply with the Marine Corps Order of which a copy is available for my review in your office. I also understand that non-Compliance will result in the termination of my pet privileges.

INT: _____

2. I understand that I am required to provide the Housing Office with a current copy of my pet Town of New Windsor license, microchip info and proof of rabies vaccination + tag number. I further understand that non compliance is a violation of the stated policy, municipal law and a violation of both my lease and conditions of occupancy.

INT: _____

3. I understand that I have 30 days from my lease signing to obtain a Town of New Windsor license for my dog. That failure to do so is a violation of the Military pet policy, violation of Municipal law and a violation of my lease and conditions of occupancy.

INT: _____

4. I understand that I am financially responsible for all damages caused by my pet, to include but not limited to, chewed woodwork, chewed blinds, urine stains, damaged screens, lawn damage, flea infestation and liability for unprovoked dog bites.

INT: _____

5. I understand that tethering (tying or chaining) of dogs is prohibited. Pets kept outdoors will be kept in a fenced area or in an approved kennel. In the event that I will be absent from quarters for over 24 hours I understand that I need to make provisions for the care of my pet and will not leave animals alone inside or outside my residence.

INT: _____

6. I understand that cats and dogs must wear their rabies tags and pet ID tag while outside, and that dogs must wear their Town License tag as well. When my pet is outside, I understand they will not be allowed to run at large, and they must be on a leash under the control of a mature responsible individual who will be able to control the actions of the animal. I agree to provide the housing office an up to date copy of the pets license, Micro Chip information and rabies vaccination annually.

INT: _____

7. In the event that I terminate ownership of a registered pet, I understand that I will need to notify the Military Housing Office to remove the pet from my records and that prior to obtaining a NEW pet, I will submit a new request for Authorization/Registration.

INT: _____

8. I understand that maintaining an animal also means maintaining a clean yard clear of animal waste.

INT: _____

9. I understand that I must pickup any animal dropping when walking my pet in common areas as per conditions of occupancy and my lease agreement.

INT: _____

10. I understand that if I neglect or physically abuse an animal or if I maintain an animal that is a Nuisance or is Destructive my pet privileges will be revoked. Furthermore, I understand that violations of the Pet Policy may cause or possibly result in removal of my pet from Stewart Terrace grounds.

INT: _____

11. I understand that the following information is required upon application, and that my lease signing may be postponed if I have not complied with this requirement.

INT: _____

12. A brief description of my pet is as follows:

- a. BREED _____
- b. Birth year _____
- c. Gender _____
- d. NAME _____
- e. COLOR _____
- f. WEIGHT _____
- g. LICENSE TAG NUMBER (required 30 days from lease signing)
- h. LICENSE EXPIRATION (required 30 days from lease signing)
- i. RABIES TAG NUMBER _____
- j. RABIES EXPIRATION _____
- k. MICROCHIP # _____

INT: _____

- a. BREED _____
- b. Birth year _____
- c. Gender _____
- d. NAME _____
- e. COLOR _____
- f. WEIGHT _____
- g. LICENSE TAG NUMBER(required 30 days from lease signing)
- h. LICENSE EXPIRATION(required 30 days from lease signing)
- i. RABIES TAG NUMBER _____
- j. RABIES EXPIRATION _____
- k. MICROCHIP # _____

INT: _____

PLEASE REMEMBER:

Documents with proof of rabies vaccination, microchip embedding and current photo are required to be submitted as well.

Acknowledgment of pet policy of residents with out pets.

13. I do not have any pets at this time. I understand the requirement to request pet privileges prior to buying and bringing a pet onto Stewart Terrace communities property or into my leased quarters and grounds.

You must sign this line. _____

SERVICE MEMBERS NAME

SIGNATURE (DATE YYYYMMDD)

UNIT ASSIGNED

PRIVACY ACT RELEASE FORM

To Whom It May Concern:

I am aware that the Privacy Act of 1974 prohibits release of personal information without my approval. I do hereby authorize the Military Housing Office to release the information contained in this family housing application to the **Marine Corps Public-Private Venture Partner, Tri-Command Communities (TCC)**, for purposes of placement on the family housing waiting list and placement in a public-private venture home.

Name (please print): _____

Signature: _____

Date: _____