

Personally Procured Move (PPM)/Do-It-Yourself (DITY)
Worksheet

Name: _____ Rank: _____

Home Phone: _____ Cell Phone: _____

Duty Phone: _____ Emergency Phone: _____

AKO E-mail Address: _____

Estimate 1,000 lbs per Furnished Room in Household

| | | |
|--------------------------------------------------------------------------------------------------------------------|-------------------|--------------------------------|
| <u>DITY</u> | | |
| Est Weight: _____ | Start Date: _____ | State of Legal Residence _____ |
| PPM Advance (Advance based off YOUR estimated weight)? Yes <input type="checkbox"/> or No <input type="checkbox"/> | | |
| Origin Address: | | |
| Destination Address: | | |

I MUST MEET WITH THE DITY COUNSELOR PRIOR TO WEIGHING, RENTING OR PURCHASING ANY EQUIPMENT.

**I UNDERSTAND THAT IF I DO NOT MEET WITH THE COUNSELOR, MY DITY
MAY BE CONSIDERED INVALID. (Initials)**

Member's Signature: 

Date/Time Appointment: _____

Counselor: _____