PRIVATIZED HOUSING AUTHORIZATION

Authorization Number: _____

LAST NAME: ______ FIRST NAME: _____

PAY GRADE: _____ ADDRESS: _____

Branch of Service: (circle) USAF USA USN USMC USCG RESERVE GUARD Unit: _____ Phone: Duty: _____ Home: ____ Cell: _____ PCS Orders/DEERS Attached: Yes () No () E-mail: _____

STATUS: () Married, accompanied by family/or arrival date:

- () Mil-to-Mil: Joint Spouse Assigned
- () Single parent with custody of dependent child (documentation req'd)
- () Local economy lease; lease expiration date: _____
- () New assigned to base; Arrival date: _____

I approve release, by the 2 CES/CEAC Housing Management Office, of all personal data to BLB Privatized Housing.

Members Signature:	Date:
DO NOT WRITE BELOW THIS LINE!	
CATEGORY: JNCO() SNCO() CGO() FGO() SO	() GO ()
BEDROOM ENTITLEMENT: 2 BDRM() 3 BDRM() 4 BDRM()	
KEY & ESSENTIAL: Yes () No ()	
1. Previously lived in Barksdale Government/Privatized quarters	s: Yes()No()
2. Move funded by PCS Orders:	Yes()No()
3. Local Funded Move Entitlement:	Yes()No()
Current Local Address:	
4. Member has Non-Temp Storage:	Yes()No()
5. Notified of impending orders (PCS, Retirement, Separation):	Yes()No()
REFERRED DATE: ELIGIBLE FOR PH: Yes	s() No()
HMO Signature:	
BLB Family Housing Use Only	
Date Lease Signed: Move-in Date:	
New Address:	
Leasing Agent Signature and Date:	