

REQUEST FOR LEASED HOUSING ACTION For use of this form, see USMEPCOM Reg 210-4		Date of Request
<u>INSTRUCTIONS</u>		
<p>1. The information in this document is to determine your eligibility for Government-leased housing. Some of the information requested is of a personal and confidential nature, and you do not have to provide such information unless you voluntarily wish to acquire Government-leased housing.</p> <p>2. The authority to request this information is contained in 10 U.S.C. Section 3012 and Annual DOD Appropriation Acts.</p> <p>3. Completion of this form is voluntary. You must provide the information if you desire to request processing of a Government lease. Failure to complete the form may cause delay or serve as a basis for termination of further processing for a Government lease.</p>		
TO: Commander	FROM: (Name, Rank/Grade, Mil Svc, SSN)	
1. Duty Station (MET Site) (City/State, Phone No.)	2. Type of Housing Desired (circle one) Unaccompanied personnel quarters furnished unfurnished	
3. Months Remaining in Service:	4. Months Remaining in USMEPCOM:	
5. Description of Proposed Unit (if applicable): (i.e., house, apt, no. of bedrooms, baths, garage, sq ft living areas, etc.)		
6. Complete Address of Proposed Unit	7. Name, Address, and Phone No. of Owner or Designated Agent	
8. Travel Time to Duty Station	9. Mileage to Duty Station	10. Desired Effective Date
11. Monthly Rental (including utilities)	12. Instructions When Utilities Must be Billed Separately	
13. Additional Requirements/Information:		
14. I (am) (am not) currently occupying proposed set of quarters. (Circle one)		
15. I (have) (have not) signed the Statement of Understanding for Acceptance of Government-leased Housing. (Circle one)		
16. Typed Name/Grade (UHR Rep)	17. Signature of Requester	Date Signed