

Congratulations on your assignment to Osan AB!

If you are Accompanied, please fill out the attached application and return with a copy of your Orders.

Once we received your completed application packet, you will be added to the Military Family Housing (MFH) projection list. The effective date of the application will be the date of departure from the losing installation (please confirm this date when you find out). Upon your arrival, we will project availability of MFH within 60 days, the maximum entitlement of TLA. If MFH cannot be provided within 60 days of your arrival, a letter of Non-Availability will be issued and authorizing you to secure off-base community housing. Please understand that we will do our best to get our customers into housing as quickly as possible.

Attached, for your convenience are forms we would like to receive back at your earliest convenience.

1. **DD Form 1746** is your application for housing on-base. The information contained in the application will us with the appropriate information concerning family composition.
2. **AF Form 4422**. All members are required to please fill out and return with this application.
3. **Pet Policy Certification**. You may bring only two Pets to Osan AB (dogs/cats).Osan Veterinary Facility Registration, will help start the registration process of registering your pets on base.
4. **Appliances Information:**
 - a. We recommend you leave all your appliances in storage except microwave, because you will receive a Gov't washer, dryer, stove, and refrigerator and dishwasher for the duration of your tour, so please do not bring your own.
5. **PCS Orders:** Please do not forget to attach your PCS Orders, Thank you!

Once I have all of required documents, then we will complete your advance housing application and reply back with additional details on housing here at Osan.

Military Family Housing :

[MFH APP WAIT LIST FOLLOW UP](mailto:51CES.CEIHH.HOUSING@US.AF.MIL)
51CES.CEIHH.HOUSING@US.AF.
MIL

Thank you,

Military Family Housing

APPLICATION FOR ASSIGNMENT TO HOUSING

PRIVACY ACT STATEMENT

AUTHORITY: 5 USC 5911 & 5912.
PRINCIPAL PURPOSE: To identify customer needs for assistance and housing requirements.
ROUTINE USE: None.
DISCLOSURE: Voluntary; however, failure to provide the requested information will result in our inability to assist you.

GENERAL INSTRUCTIONS

This form provides the Housing Office with information that will be used to provide you with military and/or community housing. **All items not listed are self-explanatory.** SECTION I (APPLICANT INFORMATION), SECTION II (MILITARY CAREER INFORMATION), SECTION III (DEPENDENT DATA), AND SECTION VI (HOUSING DATA) are to be completed by the applicant. Information on military spouses is now being requested for Basic Allowance for Quarters (BAQ) entitlement which must be included on your Military Pay Order that is forwarded to your respective financial center.

1. TYPE SERVICE DESIRED

Military Applicants: If temporary community housing is desired while awaiting military housing, mark both boxes in Item 1, and answer all questions.

Civilian Applicants: Mark the box "Housing Referral" services in Item 1b, and answer all questions.

SECTION I - APPLICANT INFORMATION

5. DOD COMPONENT

Army, Navy, Air Force, etc.

6. ADDRESS

Enter complete current address (*street number and name, apartment number, city, state/country and the 9-digit ZIP code*).

12. INSTALLATION/ORGANIZATION TRANSFERRED FROM

Enter the name of the installation you transferred from.

13. INSTALLATION/ORGANIZATION TRANSFERRED TO

Enter the name of the installation to which you are applying for housing. Include the name of the Organization/Department you will be assigned to.

SECTION II - MILITARY CAREER INFORMATION

14. DATES (*Military Applications/Military Spouse Only*)

Enter dates in order of YYMMDD. (*May 17, 1993, would be entered as 930517*).

- Enter the date your current rate/rank was effective.
- Enter your active duty service computation date.
- Enter the time (*in months*) that you have remaining on active duty.
- Enter the effective date you were dropped from accountability at your previous duty station and gained on the rolls at your new duty station for record purposes. For overseas assignment, enter your date of departure from CONUS.
- Enter your official report date (*from your PCS orders*).
- Enter your estimated arrival date.

SECTION III - DEPENDENT DATA

15. DEPENDENTS RESIDING WITH ME

a. through d. List requested data for all authorized dependents who will be residing with you.

e. Provide the Housing Office with information regarding any handicapped dependent or special family health problems that might influence your preference for a particular type of housing; *i.e., single level vs. two story, ramps for wheelchairs, expected additions to family, etc.*

SECTION IV - HOUSING DATA

16 - 21. Self-explanatory.

22. SIGNATURE

The applicant must sign the DD Form 1746.

23. DATE SUBMITTED

Enter the date the application was submitted to the Housing Office.

SECTION V - DISPOSITION (*To be completed by the Housing Office*)

24. MILITARY HOUSING

- Application Received.** Enter the year, month, day and time the application was received in the Housing Office.
- Application Effective.** Enter the date of change of duty station (*Line 14d*) or other date that will be the effective (*control*) date.
- DD Form 1747 Provided.** Enter the date that the DD Form 1747 was sent to the military applicant.
- Housing Availability.** Enter the item letter for the applicable box(es) marked under Item 4 of the DD Form 1747 returned to the applicant.
- Applicant Placed on Waiting List.** Enter the identification of the assignment waiting list(s) to which the applicant is placed.
- Effective Placement.** The effective date and time of the applicant's placement on the list(s).
- Bedrooms Requirement.** Enter the number of bedrooms required, based on dependent data in Item 15.
- Date Unit Assigned.** Enter the date the unit was assigned.

SEX OFFENDER DISCLOSURE AND ACKNOWLEDGEMENT

Attach to application for military, government-managed and privatized housing

I, (print name) _____, have read and understand the policy. By signing this document, I certify under a penalty of perjury that neither I nor any person living in my household is a registered sex offender or required to register as a sex offender. I understand I am required to notify the installation housing office immediately if circumstances change so that this certification is no longer true. I understand the policies, procedures and consequences below apply to those persons who will reside with me, all of whom are listed on the DD Form 1746, *Application for Assignment to Housing*.

POLICIES

Air Force Installations requires full disclosure from persons applying for military, government-managed or privatized housing who are sex offenders or who intend to have dependents who are sex offenders reside with them.

If you, or an authorized dependent who will reside with you, are found to be registered or are required to register as a sex offender under the laws of any state, you could be denied residency in Air Force military, government-managed and privatized housing.

If you, anyone living in your household or visitor is found to be a sex offender after you take occupancy, you may be subject to eviction and/or barment from the Installation.

Installation Commanders are authorized to approve or disapprove applications from persons for residency in military, government-managed and privatized housing when they or another prospective resident of the home is a sex offender.

PROCEDURES

Applicants who cannot sign this form because they or a dependent who will reside in the home with them is a sex offender will be required to submit written information and documentation, which may include but is not limited to the following, in order to be considered for housing by the Installation Commander:

1. Whether the sex offender is the military member, civilian or dependent
2. Nature and circumstances of the offense
3. Exact criminal statute or law under which the person was convicted
4. State or jurisdiction where the offense occurred and was adjudicated
5. Elapsed time since the offense was committed
6. Age of the offender at the time the offense was committed
7. Age of the victim at the time the offense was committed
8. Evidence that tends to demonstrate offender's rehabilitation, exemplary conduct, or other commitment to obeying the law
9. Whether the conviction requiring registration has been reversed, vacated, or set aside, or if the registrant has been granted unconditional pardon of innocence for the offense requiring registration
10. Conditions of parole/probation or monitoring, if any

CONSEQUENCES

Falsification of this form or any other information pertaining to your criminal history or sexual offenses will result in immediate denial of your application for or retention of military, government-managed or privatized housing.

Signature of Applicant

Date

OSAN Veterinary Treatment Facility Registration

1. Has your pet ever been seen at another military veterinary in the world?

No Yes If yes, Where _____

2. SPONSOR DATA

a. Sponsor Last Name _____ , First Name _____

b. Spouse Last Name _____ , First Name _____

c. Home Address(Mailing Address)

PSC _____ BOX _____ APO, AP _____

d. home phone(Include Area Code) _____ e. Duty Phone _____

f. Cell Phone _____ g. Spouse/Other Phone _____

h. Service(O one) USAF ARMY CIV OTHER _____

i. Unit _____

j. Grade _____ k. Location(O one) ON BASE OFF BASE

l. DEROS _____ m. E-mail _____

3. ANIMAL DATA

Pet #1

a. Name _____ b. Species _____

c. Breed _____ d. Color _____

e. Data of Birth _____ f. Sex M (neutered) F (spayed)

g. Microchip Number _____

Pet #2

a. Name _____ b. Species _____

c. Breed _____ d. Color _____

e. Data of Birth _____ f. Sex M (neutered) F (spayed)

g. Microchip Number _____

PET POLICY
Aggressive Pets in
Military, Government-Managed
Family Housing

AFI 32-6001_AFGM2, 28 Mar 2011

PET POLICY

Pets in Military, Government-Managed Family Housing

As of 28 Mar 2011

a. Residents may not board dogs of any breed (including a mixed breed) that are deemed “aggressive or potentially aggressive,” (Exception: a certified military working dog)

* Breeds of dogs : Pit Bull (American Staffordshire Bull Terrier or English Staffordshire Bull Terrier), Rottweiler, Doberman Pinscher, Chow and wolf hybrids

* Type of behaviors: growling or snarling at people approaching

(1) Unprovoked barking,

(2) Aggressively running along a fence line when people are present

(3) Biting or scratching people

(4) Escaping confinement or restriction to chase people



PET POLICY

Pets in Military, Government-Managed Family Housing



PET POLICY

Pets in Military, Government-Managed Family Housing

b. No exotic animals; **reptiles, rodents** (other than hamsters and guinea pigs), **ferrets, hedgehogs, skunks, rats, raccoons, squirrels, pot bellied pigs, monkeys, arachnids, or any farm animal** (May not be listed)



Anaconda



Hedgehogs



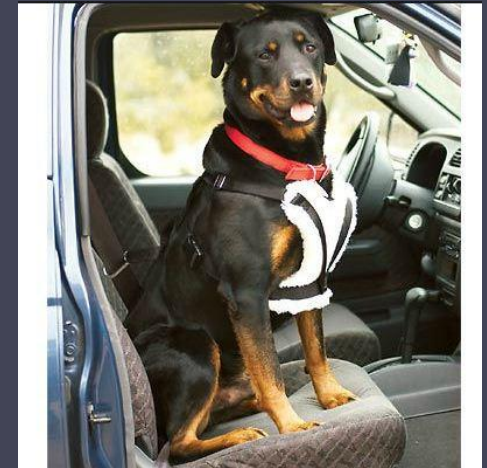
Raccoons

PET POLICY

Pets in Military, Government-Managed Family Housing

c. Pets must be secured with leashes/under positive control while outdoors (except in fenced patios and yards). Pets must not be left tied or unattended in exterior appurtenances or unfenced yards or allowed to run loose outside fenced yard.

d. Pet owners must maintain current immunizations on all pets. Dogs and cats are required to wear a collar or harness with current rabies attached.



PET POLICY

Pets in Military, Government-Managed Family Housing

e. Pet areas must be cleaned regularly to control and prevent vermin infestation. Pet feces must be picked up daily or immediately if the pet evacuates outside the patio or yard.

f. Operating a commercial kennel is prohibited.

g. For government controlled housing, the Installation Commander retains the authority to determine the following:

- (1) Number and type of pets allowed per household : 2 pets
- (2) Termination of residency for failure to remove aggressive or unruly pets



LETTER OF COMPLETION

DATE

I (print name) _____ have read the slide and understand the pet policy in
Military, Government-Managed Family Housing.

OCCUPANT SIGNATURE

HOUSING UNIT ADDRESS

