MCAS BEAUFORT
Office: 843-228-6000 /DSN 335-6000
Fax: 843-228-6422/DSN 335-6422
Email: BEAUFORT_HOUSING@USMC.MIL
Mail: Military Housing Office
P.O. Box 55012
Beaufort, SC 29904

MCRD PARRIS ISLAND/NAVAL HOSPITAL BEAUFORT
Office: 843-228-2244/DSN 335-2244
Fax: 843-228-3190/DSN 335-3190
Email: PARR_SMB_MCRDPI_HOUSING@USMC.MIL
Mail: Commanding General Housing
P.O. Box 19001
Parris Island, SC 29905

From: Military Housing Office (MHO) Staff
To: Military Housing Applicant

Subj: HOUSING APPLICATION PACKET (CIVILIAN "WATERFALL" /OTHER THAN ACTIVE DUTY)

Thank you for your interest in housing. The following documents are required to complete your housing application packet and to be considered for referral to AMCC Tri-Command Communities (on-base housing). Please contact the appropriate Military Housing Office (listed above) to answer any questions you may have in regards to housing. Please send all documents to the MHO by email or fax. Please include a good phone number and/or email address where we may contact you.

NOTE: All documents **must** be received by the Military Housing Office to complete your application packet. If any documentation is missing or not completed your application **will not** be referred to AMCC Tri-Command Communities.

FORM	DATE MHO RECEIVED
Housing Application (Form DD 1746)	_____
SECNAV 5512/1 Dept of Navy Base Access Form (this is to be completed by all occupants who will reside in home)	_____
Registered Sex Offender Policy	_____
Privacy Act Release Form	_____
Pertinent Facts	
Pet Documentation Form ***Please include shot records, microchip documentation and photo of pet(s)*** ***No Prohibited Dog Breeds (see attached order)***	_____ _____
DD 214 (if applicable)	
Copy front and back of Military ID, CAC, Driver's License, Student ID and Social Security Cards. (as applicable for all occupants in the home)	_____
Current copy of Leave and Earnings Statement (LES) or Employment Verification Letter (If LES is not available)	_____
Copy of most recent tax return Form 1040, front page only	_____
Marriage Certificate	_____
Birth Certificate(s) of children Custody Paperwork for children from previous marriages (if applicable)	_____
Pregnancy Verification Letter from Primary Care Manager (if applicable)	
General or Specific Power of Attorney (if applicable)	

Must say the following….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 regulations. Spouse must sign as follows…"Military Member's Signature" POA "Spouse's Signature"

You will receive the MHO PLAIN LANGUAGE BRIEF in a separate email – THIS IS REQUIRED TO COMPLETE THE APPLICATION. NO HOUSING ASSIGNMENT WILL BE MADE WITHOUT THE FOLLOWING:
If applicant is in person, Applicant will sign receipt and acknowledgment statement of reviewing brief. If applicant is working via telephone and email, Applicant will be emailed the brief and go over on the phone with counselor. APPLICANT MUST REPLY TO THAT EMAIL TO ACKNOWLEDGE RECEIPT.