MCAS BEAUFORT/MCRD PARRIS ISLAND
MILITARY HOUSING OFFICE
PRIVACY ACT RELEASE FORM

To Whom It May Concern:

I am aware that the Privacy Act of 1974 prohibits release of personal information without my approval. I do hereby authorize the Military Housing Office to release the information contained in this family housing application to the Marine Corps Public-Private Venture Partner, Atlantic Marine Corps Communities at Tri-Command, for purposes of placement on the family housing waiting list and placement in a public-private venture home. I also authorize release of information from AMCC at Tri-Command to the MHO.

I understand that if I am not Active Duty, it is necessary to conduct a Landlord, Credit and Criminal Background check as part of my qualification for housing; therefore I authorize Atlantic Marine Corps Communities at Tri-Command permission to conduct the additional screening. I also authorize release of my dependents names to the Provost Marshall Office for the purpose of providing my dependents access to the Pine Grove and Laurel Bay housing areas.

_____
Signature

_____
Name (please print) Date: