



DEPARTMENT OF THE AIR FORCE
HEADQUARTERS 2D MISSION SUPPORT GROUP (AFGSC)
BARKSDALE AIR FORCE BASE, LOUISIANA

MEMORANDIUM FOR INBOUND PERSONNEL

FROM: MSG/CC

SUBJECT: Family Housing Options

1. Welcome! In our effort to help you and your family have a smooth move to Barksdale AFB, we want to make you aware of an exciting new housing option available on the installation. Our installation's military family housing is privatized. Barksdale, Langley, Bolling (BLB) Housing, LLC, known as the Project Owner (PO), is responsible to renovate, construct, maintain, repair and manage housing as required. In addition to having the option to purchase or rent housing in the local community, you now have the option to reside in privatized housing (PH) by signing a Tenant Lease Agreement with BLB. Unlike community housing, rent for the privatized home of your choice cannot exceed the "with dependant" BAH rate when designated for your rank.
2. Our privatized housing is part of the Air Force's larger initiative to eliminate inadequate housing for Airmen. Privatized housing is very comparable to housing in the local community. In fact we will soon complete construction on 561 brand new homes! Over the next 7 years, BLB will also renovate, replace or construct new amenities, such as a Welcome Center, Community Center, swimming pool, playgrounds, walking trails, etc., that will improve the quality of life for our families.
3. BLB provides total lawn care for any part of your yard that is not enclosed by a fence, weekly trash and recycling pickup, no security deposit, no pet deposit, community events and much more, all at no cost to you. They have a website providing more detailed information at www.barksdale.pinnaclefamilyhousing.com. This is an exciting time in the housing arena with marvelous opportunities and benefits for our families. I encourage you to consider PH.
4. When you arrive at the installation, visit the Housing Management Office (HMO) as required by your PCS orders in block 23. The housing team will provide you the latest information available on the privatized housing initiative as well as community housing referral services. The HMO is a valuable source in providing school, utility and other community information. I encourage you to contact them now at DSN 781-4791 or commercially at (318) 456-4791.
5. Again, welcome! We know you will enjoy your tour at Barksdale AFB. Here's wishing you and your family a safe move.

WELCOME TO TEAM
BARKSDALE!

A handwritten signature in black ink, appearing to read "Crinley S. Hoover", is located in the bottom right area of the page.

CRINLEY S. HOOVER, Colonel, USAF
Commander

APPLICATION FOR HOUSING ASSIGNMENT

APPLICANT INFORMATION

LAST NAME:	FIRST NAME:	MI:	DOB (MM-DD-YY):	SOCIAL SECURITY NUMBER:	
PREVIOUS ADDRESS:			CITY:	STATE:	ZIP CODE:
EMAIL ADDRESS:				PHONE (PRIMARY):	
PAY GRADE:	BRANCH OF SERVICE:			DATE HOUSING NEEDED (MM-DD-YY):	
ANY "EFMP" FAMILY MEMBERS?	REPORT NLT DATE:			PROMOTABLE? DO YOU HAVE A LINE #?	

STATUS OF APPLICANT

MARITAL STATUS: _____ TOTAL NUMBER OF OCCUPANTS: _____
 DUAL MILITARY?: _____ ESTIMATED BAH RATE (\$): _____

IF YOU ANSWERED YES TO DUAL MILITARY, PLEASE ANSWER THE FOLLOWING FOR THE OTHER SERVICE MEMBER:

SERVICE MEMBERS NAME: _____ PAY GRADE: _____
 BRANCH OF SERVICE: _____

ORGANIZATION/UNIT TRANSFERRED FROM: _____

ORGANIZATION/UNIT TRANSFERRED TO: _____

DO YOU HAVE PETS? _____ HOW MANY? _____ TYPE: _____ WEIGHT: _____

(MAXIMUM OF 2 PETS PER HOUSEHOLD) TYPE: _____ WEIGHT: _____

DEPENDENT DATA (PROOF OF DOB IS REQUIRED)

DEPENDENTS RESIDING WITH THE MILITARY MEMBER NAME FIRST - MI - LAST	RELATIONSHIP	GENDER	DOB	SOCIAL SECURITY #

EMERGENCY CONTACT INFORMATION

NAME:	STREET ADDRESS:	CITY:	STATE:	ZIP CODE:
NAME:	STREET ADDRESS:	CITY:	STATE:	ZIP CODE:

RENTAL HISTORY

PRESENT ADDRESS:	CITY:	STATE:	ZIP CODE:
NAME OF PROPERTY OWNER OR MANAGER:	PHONE:	MOVE IN DATE:	
PRESENT ADDRESS:	CITY:	STATE:	ZIP CODE:
NAME OF PROPERTY OWNER OR MANAGER:	PHONE:	MOVE IN DATE:	
HAVE YOU OR YOUR SPOUSE EVER BEEN EVICTED? (CHECK ONE) YES <input type="checkbox"/> NO <input type="checkbox"/>			
HAVE YOU OR YOUR SPOUSE EVER BEEN SUED FOR NONPAYMENT OF RENT OR DAMAGES TO RENTAL PROPERTY (CHECK ONE) YES <input type="checkbox"/> NO <input type="checkbox"/>			

EMPLOYMENT / OTHER INCOME

PRESENT EMPLOYER:	HOW LONG:	WORK PHONE:	
ADDRESS:	CITY:	STATE:	ZIP CODE:
GROSS MONTHLY SALARY (\$):	POSITION HELD / OCCUPATION:	SUPERVISOR'S NAME:	SUPERVISOR'S PHONE:
PREVIOUS EMPLOYER:	HOW LONG:	WORK PHONE:	
ADDRESS:	CITY:	STATE:	ZIP CODE:
GROSS MONTHLY SALARY (\$):	POSITION HELD / OCCUPATION:	SUPERVISOR'S NAME:	SUPERVISOR'S PHONE:
DISCLOSURE OF ADDITIONAL INCOME SUCH AS CHILD SUPPORT ALIMONY, SOCIAL SECURITY, WELFARE, ETC. IS MANDATORY IF APPLYING FOR GOVERNMENT REGULATED HOUSING. OTHERWISE DISCLOSURE IS VOLUNTARY IF YOU WISH TO HAVE IT CONSIDERED IN THE DETERMINATION OF YOUR QUALIFICATION.			
AMOUNT OF \$: _____	PER: _____	SOURCE: _____	
AMOUNT OF \$: _____	PER: _____	SOURCE: _____	

HAVE YOU OR YOUR SPOUSE EVER DECLARED BANKRUPTCY? (CHECK ONE) YES <input type="checkbox"/> NO <input type="checkbox"/>	
HAVE YOU OR YOUR SPOUSE EVER BEEN CONVICTED OF, OR PLED GUILTY TO ANY OFFENSE OTHER THAN A MINOR TRAFFIC VIOLATION? (CHECK ONE) YES _____ NO _____	

BANK AND CREDIT REFERENCES

NAME OF BANK:	CHECKING ACCOUNT NUMBER:	SAVINGS ACCOUNT NUMBER:
NAME OF BANK:	CHECKING ACCOUNT NUMBER:	SAVINGS ACCOUNT NUMBER:
CREDIT REFERENCE:	ACCOUNT NUMBER:	
CREDIT REFERENCE:	ACCOUNT NUMBER:	

OTHER INFORMATION

SPECIAL REQUESTS / COMMENTS (PERTAINING TO HOUSING ASSIGNMENTS OR BASIC ALLOWANCE FOR HOUSING MATTERS):

HOW DID YOU HEAR ABOUT US?

CHECK THOSE THAT APPLY

- | | |
|--|--|
| <input type="checkbox"/> AHRN | <input type="checkbox"/> REFERRED BY A RESIDENT → NAME: _____ |
| <input type="checkbox"/> WALK IN | <input type="checkbox"/> REFERRED BY ANOTHER INSTALLATION → WHICH ONE: _____ |
| <input type="checkbox"/> COMMUNITY WEBSITE | <input type="checkbox"/> SEARCH ENGINE → WHICH ONE: _____ |
| <input type="checkbox"/> REFERRED BY COMMAND | <input type="checkbox"/> BROCHURE / FLYER → WHERE DID YOU SEE IT?: _____ |

CORRECT INFORMATION

I HEREBY GIVE THE MANAGEMENT/OWNER THE AUTHORITY TO INVESTIGATE MY CREDIT RATING, MY CURRENT AND PAST RENTAL RECORD, MY POLICE RECORD (IF ANY), AND ALL OTHER INFORMATION NECESSARY TO DETERMINE ELIGIBILITY. I UNDERSTAND THAT ANY MISREPRESENTATION OF INFORMATION ON THIS FORM WILL DISQUALIFY ME FROM CONSIDERATION FOR LEASING AND MAY BE GROUNDS FOR EVICTION. I HEREBY AFFIRM THAT THE FOREGOING INFORMATION IS TRUE AND CORRECT TO THE BEST OF MY KNOWLEDGE.

WARNING: SECTION 1001 OF TITLE 18 OF THE U.S. CODE MAKES IT A CRIMINAL OFFENSE TO MAKE FALSE STATEMENTS OR MISREPRESENTATIONS TO ANY DEPARTMENT OR AGENCY OF THE UNITED STATES AS TO MATTERS WITHIN ITS JURISDICTION.

SIGNATURE OF APPLICANT / DATE

DISPOSITION (TO BE COMPLETED BY HOUSING OFFICE)

DATE APPLICATION RECEIVED: _____	ELIGIBILITY DATE: _____
HOUSING QUALIFIED FOR: _____	SIZE (# OF BEDROOMS): _____
DATE HOUSING ASSIGNED: _____	ADDRESS ASSIGNED: _____

SIGNATURE OF HOUSING CONSULTANT / DATE

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: 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 () No ()

HMO Signature: _____

BLB Family Housing Use Only

Date Lease Signed: _____ Move-in Date: _____

New Address: _____

Leasing Agent Signature and Date: _____

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

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: 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 () No ()

HMO Signature: _____

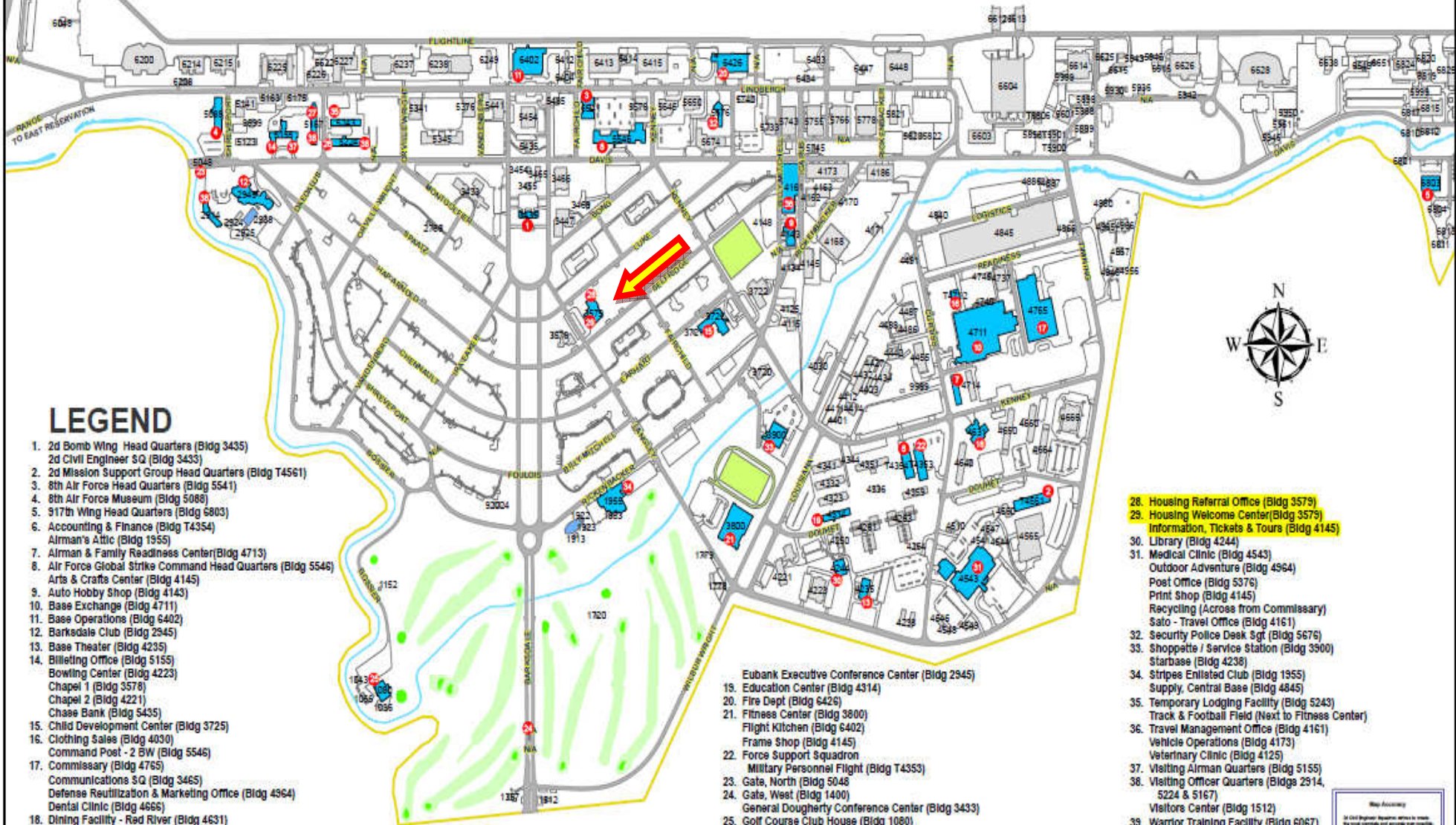
BLB Family Housing Use Only

Date Lease Signed: _____ Move-in Date: _____

New Address: _____

Leasing Agent Signature and Date: _____

BARKSDALE AIR FORCE BASE



LEGEND

1. 2d Bomb Wing Head Quarters (Bldg 3435)
2d Civil Engineer S Q (Bldg 3433)
2. 2d Mission Support Group Head Quarters (Bldg T4561)
3. 8th Air Force Head Quarters (Bldg 5541)
4. 8th Air Force Museum (Bldg 5088)
5. 917th Wing Head Quarters (Bldg 6803)
6. Accounting & Finance (Bldg T4354)
Alrman's Attic (Bldg 1955)
7. Alrman & Family Readiness Center (Bldg 4713)
8. Alr Force Global Strike Command Head Quarters (Bldg 5546)
Arts & Crafts Center (Bldg 4145)
9. Auto Hobby Shop (Bldg 4143)
10. Base Exchange (Bldg 4711)
11. Base Operations (Bldg 6402)
12. Barksdale Club (Bldg 2945)
13. Base Theater (Bldg 4235)
14. Billing Office (Bldg 5155)
Bowling Center (Bldg 4223)
Chapel 1 (Bldg 3578)
Chapel 2 (Bldg 4221)
Chase Bank (Bldg 5435)
15. Child Development Center (Bldg 3725)
16. Clothing Sales (Bldg 4030)
Command Post - 2 BW (Bldg 5545)
17. Commissary (Bldg 4765)
Communications S Q (Bldg 3465)
Defense Reutilization & Marketing Office (Bldg 4964)
Dental Clinic (Bldg 4665)
18. Dining Facility - Red River (Bldg 4631)
Dormitories (Bldgs 4261, 4263, 4341, 4332, 4323, 4351, 4640, 4650, 4660 & 4664)

- Eubank Executive Conference Center (Bldg 2945)
19. Education Center (Bldg 4314)
20. Fire Dept (Bldg 6425)
21. Fitness Center (Bldg 3800)
Flight Kitchen (Bldg 6402)
Frame Shop (Bldg 4145)
22. Force Support Squadron
Military Personnel Flight (Bldg T4353)
23. Gate, North (Bldg 5048)
24. Gate, West (Bldg 1400)
General Dougherty Conference Center (Bldg 3433)
Golf Course Club House (Bldg 1080)
25. Guest House, DV (Bldg 5224)
27. Guest House, Officers (Bldg 5167)
Health & Wellness Center (Bldg 4510)

28. Housing Referral Office (Bldg 3579)
29. Housing Welcome Center (Bldg 3579)
Information, Tickets & Tours (Bldg 4145)
30. Library (Bldg 4244)
31. Medical Clinic (Bldg 4543)
Outdoor Adventure (Bldg 4964)
Post Office (Bldg 5376)
Print Shop (Bldg 4145)
Recycling (Across from Commissary)
Sato - Travel Office (Bldg 4161)
32. Security Police Desk Sgt (Bldg 5676)
33. Shoppette / Service Station (Bldg 3900)
Starbase (Bldg 4238)
34. Stripes Enlisted Club (Bldg 1955)
Supply, Central Base (Bldg 4845)
35. Temporary Lodging Facility (Bldg 5243)
Track & Football Field (Next to Fitness Center)
36. Travel Management Office (Bldg 4161)
Vehicle Operations (Bldg 4173)
Veterinary Clinic (Bldg 4125)
37. Visiting Alrman Quarters (Bldg 5155)
38. Visiting Officer Quarters (Bldgs 2514, 5224 & 5167)
Visitors Center (Bldg 1512)
39. Warrior Training Facility (Bldg 6067)
Wood Hobby Shop (Bldg 4145)
Youth Center (Bldg 3722)

Map Accuracy
All Civil Engineer locations shown on this map were verified and accurate as provided. Copyright © 2010 BAE Systems

↑
↑

HOUSING OFFICE

(318)456-4791/4740