**ON-BASE LONG TERM HOUSEGUEST (181-365 DAYS) CHECKLIST**

**SPONSOR MUST COMPLETELY FILL OUT BELOW CHECKLIST PRIOR TO TURNING IN**

|  |  |  |  |
| --- | --- | --- | --- |
| **ITEM NUMBER** | **ITEM** | **SPONSOR****INITIALS** | **CLERK****INITIALS** |
| **#1** | **JB2 Form 0-180 (Dated 01 May 2020)** |  |  |
| #1A | **From Block** (Sponsor Name and Address) |  |  |
| #1B | **Duration of Request** |  |  |
| #1C | **Place of Residency** (Sponsor’s Resident Address on Base) |  |  |
| #1D | **Justification** |  |  |
| #1E | **Houseguest Information** |  |  |
| #1F | **Requestor** Name/Signature (Digital or Wet)/Date/Phone/Email  |  |  |
| #1G | **Sponsor** Name/Signature (Digital or Wet)/Date/Phone/Email (Must be same as Sponsor listed on SECNAV Form 5512) |  |  |
| #1H | **Housing Office Endorsement** (Digital OR Wet Signature) |  |  |
| #1I | **Command** Name/Signature (Digital or Wet)/Date/Phone/Email **Required for All Applications over 30 days**  |  |  |
| **#2** | **Copy of Sponsor’s CAC** (Front/Back scanned copy only; printed pictures/unreadable copies are invalid) |  |  |
| **#3** | **Copy of Non DoD Civilian’s Driver’s License or State Issued ID** (Front/Back scanned copy only; printed pictures/unreadable copies are invalid) |  |  |
| **#4** | **Housing Authorization Memorandum/Exception to Policy for Visitor (**Must include the dates the visitor will be in the residence) |  |  |
| **#5** | **SECNAV Form 5512-1 (Dated May 2021)** |  |  |
| **NOTE:** If the Resident intends to add the Houseguest to their current Lease Agreement with Housing, the Lease Signer must submit an On-Base Resident Application once the Lease Agreement is updated and the Individual(s) are listed as authorized occupants.**NOTE:** Houseguest, whether long term or short term, is defined as an individual who is not on the lease and will require an Exception to Policy from Housing Authority. |  **GREEN** **BOOK** |

**BELOW LISTED INFORMATION IS FOR PASS & ID (PID) USE ONLY**

**1. REQUEST RECEIVED BY - Rank & Name (Last, First):\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_/ Date:\_\_\_\_\_\_\_\_\_\_**

**2. PID CLERK SYSTEM VERIFICATION Clerk Initials**

|  |  |
| --- | --- |
| **National Crime Information Center (NCIC)** **Background & Sex Offender Registry (SOR) Check:** |  |
| **Barment Check:** |  |
| **PID Clerk Name (Last, First): Date:**  |

**3. NCOIC Review:**

**(Rank/Name) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ / Date\_\_\_\_\_\_\_\_\_\_\_\_ Recommend: Approved / Disapproved**

**4. JB21/Superintendent Review:**

**(Rank/Name) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ / Date\_\_\_\_\_\_\_\_\_\_\_\_ Recommend: Approved / Disapproved**

**5. JB2 Approval/Disapproval:**

**(Rank/Name) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ / Date\_\_\_\_\_\_\_\_\_\_\_\_ Recommend: Approved / Disapproved**

**Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Comments: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**