

# GUEST AUTHORIZATION REQUEST

## Section I – General Information (Please Print)

Resident's Name (Last, First, MI):

Housing Site or Barracks Name:

Resident's Permanent Duty Station & Work Phone:

## Section II – Guest Information

**This request is valid for up to 30 days. If you anticipate your guest(s) will remain beyond 30 days, a written request must be submitted to the TRACEN Petaluma Housing Office via your Commanding Officer, and must be approved prior to the expiration of this request.**

Name:	Age:	Relationship to Resident:	Arrival Date:	Departure Date:

## Section III – Statement of Understanding

*Jointly and individually, we hereby certify that no financial consideration is being paid to the resident or any member of this family by the guest(s) as rental for occupancy of the premises. Additionally, the assigned member is responsible for the conduct of his/her guest(s).*

Guest Signature:

Date:

Residents Signature:

Date:

### OFFICE USE ONLY

Approved

Disapproved

See Remarks

Remarks:

Housing Representative Signature:

Date: