

Department of Homeland Security  
U.S. Coast Guard  
BASEKODHSG-008  
(Rev. 06/23)

## ABSENCE FROM QUARTERS FORM BASE KODIAK HOUSING

### Section I - General Information

Service Member's Name ( <i>Last, First, MI</i> ):	Rank:	Duty Station:	Date:
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Resident's Complete Address & Phone #:

Will pets remain in quarters?      NO      YES *If yes, read the following statement and initial.*  
I understand that I am fully responsible for any damage incurred to the housing unit by my pets while away. I am responsible to ensure pets are cleaned up after daily. I have discussed this with the caretaker. MBR Initials \_\_\_\_\_

Absence applies to:      Entire Family      Family of Member Only      Spouse Deployed

Date of Absence:      From:      To:

**Certification:** During this absence the above-named caretaker will adequately care for my government quarters and grounds. I understand the Housing Office must approve any absence in excess of sixty (60) days. I understand it is against regulations to rent or sublease my government quarters during my absence. My spouse or I will notify the Housing Office immediately after we return. I understand the Housing Office will enter my quarters in case of emergency. I understand I am responsible for the conduct of my caretaker while in my assigned quarters. I will notify the Housing Office if my absence exceeds the date above.

Remarks:

Signature of Service Member:

Signature of Caretaker:	Caretaker Phone Number:
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### Housing Office Approval

Verify Caretaker Information: Initial \_\_\_\_\_ Date \_\_\_\_\_ Cold Weather Red Light Required:      Yes      No

Signature of Area Housing Officer/Housing Officer Representative:	Date:
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