

ASSIGNMENT OF STAFF HOUSING CDFRM

U.S. DEPARTMENT OF JUSTICE

FEDERAL BUREAU OF PRISONS

FACILITY	DATE
Employee Name (Last, First, Middle Initial)	

Effective \_\_\_\_\_, 20 \_\_\_\_ you have been assigned reservation housing as follows:

Reservation House No. \_\_\_\_\_ with a bi-weekly deduction of \$ \_\_\_\_\_ (based on the information provided on the Government Quarters Inventory form).

The Control Center Officer is hereby authorized to issue the necessary keys.

Chief Executive Officer
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In consideration for the privilege of occupying Government-owned housing, I agree to observe the current regulations and authorize rental deductions from my pay as shown above; and to notify the Supervisory Contract Specialist of the addition or removal of personal-owned appliances listed in the Property Management Manual. I certify that personal firearms and weapons will not be stored in my reservation house. This includes firearms of all types, and other types of weapons such as, but not limited to crossbows, bows, arrows, explosive devices, ammunition, or pellet guns. I also certify that I will adhere to all other restrictions and refrain from prohibited activities listed in the Property Management Manual. I understand that assignment and termination of occupancy may be made as the needs of the service dictate and whenever the need arises to terminate occupancy of this housing, moving costs shall be solely at my personal expense.

I hereby acknowledge receipt of the Institution Supplement and reservation house keys as follows:  
\_\_\_\_\_ each, House No. \_\_\_\_\_.

Signature of Employee/Occupant	(Date)
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