

**HOUSING MANAGEMENT DIVISION
SINGLE SOLDIER QUARTERS BRANCH**

CONDITION OF OCCUPANCY FOR MILITARY UNACCOMPANIED HOUSING

1. _____ is assigned to _____ to be occupied
Name Last, First, MI Building/Room

as unaccompanied military housing _____ (DD/MM/YY)

2. **OCCUPANT USE.** Occupancy of the premises is solely as an unaccompanied military residence. All guidelines/military instructions provided must be followed. Use of the SSQ unit for any other purpose is prohibited.

3. **PETS.** The only pets allowed on the premises are fish. The occupant further understands that any damage caused to the unit by their pet(s) is also their responsibility.

4. **CONDITION OF PROPERTY.** The SSQ branch and the occupant have made an inspection of the property to make sure it is in a fit and habitable condition, except for those damages or malfunctions that have been itemized in writing on the Quarters Condition Inspection Report. Housing Management and occupant will retain copies of this report. Any additional items noted by the occupant should be submitted in writing and received by dormitory manager within 30-day period. The SSQ branch will consider the property to be in acceptable condition and suitable for occupancy.

5. **PLUMBING AND APPLIANCES.** The occupant should keep the premises, including all plumbing fixtures and appliances, as clean and safe as conditions permit and should attempt to unclog and keep clear all waste pipes, drains and water closets where possible. At the termination of occupancy, all appliances and equipment should be in good working order and the premises should be in a clean condition. Normal wear and tear accepted.

6. **USE AND REPAIR OF FACILITIES.** The occupant is expected to take care of all electrical, plumbing, sanitary, heating, ventilating, air conditioning, and other fixtures, facilities and appliances in or on the premises. Any damage caused by either the military member or guests beyond normal wear and tear will be repaired at the member's expense. The occupant should, at his/her own expense: a. replace or repair all broken or damaged screens and drywall occurring during their occupancy; normal wear and tear accepted; b. keep in state of good repair and cleanliness all parts of the property including equipment and appliances and keep all property free from objectionable features, nuisances, and hazards. Any repairs or replacements of property, equipment, or appliances required due to the abuse or negligence by acts or omissions of the military member or guests will be paid for by the military member.

7. **NOTICE OF DEFECTS OR MALFUNCTION.** The occupant should promptly notify the SSQ branch during normal duty hours, or after hours 442-3251, whenever the structure or the equipment of any fixture contained therein becomes defective, broken, damaged, or malfunctions in any way.

8. **RESIDENT CONDUCT.** Residents should conduct themselves and require other persons on the premises to conduct themselves in a manner that will not disturb their neighbors.
9. **HEALTH AND SAFETY.** The occupant should comply with all health and safety regulations/instructions imposed by the commander.
10. **SYSTEM OVERLOADS.** The occupant should not install or use any equipment that will overload any water, heating, electrical, sewage, drainage, or air conditioning systems of the assigned premises.
11. **SMOKE DETECTORS.** It is a violation of federal law to remove any fire detector or smoke detector in the soldiers quarters. **NO NOT** check the detectors. Checking a detector in your room will send an alarm to the fire department, and an alarm board will detect your room. Report any malfunctions to the SSSQ branch.
12. **INSURANCE.** Currently not available in the State of Oklahoma for Military barracks.
13. **REDECORATING AND ALTERATIONS.** No alterations, additions, or improvements are allowed. If alterations are made, the premises will be returned to their original condition at the expense of the occupant.
14. **PERIODS OF ABSENCE.** The occupant must notify the SSQ branch whenever extended absences from quarters are anticipated; this includes TDYs.
15. **ACCESS TO PROPERTY.** When warranted by circumstances or reasonable cause, the installation commander or a duty designated representative may enter the premises to conduct a visual inspection. The SSQ staff may enter the premises to perform a maintenance/damage inspection, or to change filters or other preventive maintenance type activity.
16. **NEGLECT AND COSTS.** If at any time, the Army is required to make repairs to the property or equipment for damages caused by your abuse or negligence or of your guests, the repairs will be made at the expense of the occupant. As appropriate, housing occupants should be afforded the option to complete the necessary repairs either by outside contractors or on their own. You must contact the SSQ branch for specific guidance on how to repair the damage and the expected results. The housing office will initiate collection actions, DD139, directly from the Military Pay Section.
17. **VANDALISM.** Costs the Army thousands of dollars annually. You must make every effort to prevent vandalism, theft, and damage to your equipment, furnishings, and residence. The manager must immediately notify Military Police when damage, theft, or vandalism occurs. **PERSONNEL DISCOVERED DAMAGING OR STEALING ASSETS WILL BE PROSECUTED TO THE FULLEST EXTENT OF THE LAW UNDER THE UCMJ. ALL LEGAL MEANS WILL BE USED TO COLLECT DAMAGES AND SECURE AREAS FROM DESTRUCTION.**
18. **STORAGE.** The storage of recreational vehicles, quad-runners, utility trailers, motorcycle trailers, etc. in the area is not authorized. This policy is necessary for safe access by responding emergency vehicles and the safety of dormitory neighbors.

I understand it is my responsibility to contact the Transportation Office in person to arrange for the movement of household goods at government expense prior to the movement of such goods. I understand that it is my responsibility to provide a minimum of 30 days advance notice of departure from the installation and intent to terminate quarters for any reason.

CERTIFY I HAVE RECEIVED THIS MEMORANDUM, RESIDENT, AND MY UNIT SOP. I FURTHER CERTIFY I WILL OBEY ALL THE CONDITIONS CONTAINED HEREIN.

PRINTED FULL NAME (LAST, FIRST, MI) (RANK)

(SIGNATURE) (QTRS#) (DATE)

Single Soldier Housing Management Representative:

(Print Full Name) (Signature) (Date)