Department of Transportation NOTICE OF INTENT TO VACATE U.S. Coast Guard **GOVERNMENT OWNED OR LEASED QUARTERS** (Rev. 9/98) USE OF FORM: This form shall be submitted to the Local Housing Office 45 days in advance of your anticipated departure / vacating date. Please complete all blocks and print legibly. Name (last, first, MI) Emp ID: Rank Current Quarters and Phone Number: Bedroom Category Type: Size: O Government Owned Family Quarters O Leased Family Quarters O Unaccompanied Personnel Leased Housing (UPLH) O Unaccompanied Personnel Housing (UPH) Current Duty Station and Phone Number: New Duty Station: Reason for Vacating: O PCS Transfer O Discharge/RELAD O Retirement O Relocation to: \_\_\_\_\_ O Other: Inspection Dates: Fill-in Pre-Check-out and Final inspection dates/times. You are responsible for being at your unit at these times. Reminder that changes to the below can affect scheduled check-in dates for incoming personnel. Contact Housing immediately of any changes to the below. Pre-Check Out Inspection Time and Date: Final Inspection Time and Date: Tenant Signature: Date:

Housing Use Only		
Unit Cleared by (Housing Management Signature):		Date:
No. of Keys Returned:	Mailbox Keys Returned:	

Date:

Inspection Dates noted in appt book (Housing Rep Signature):