## TEMPORARY LODGING ALLOWANCE (TLA) DEPARTURE/ALTERNATE TEMPORARY LODGING CLAIM

MEMBER INFORAMATION				
Name:	SS	SN :		
Paygrade:	Ph	Phone Number:		
Command:	U	IC:		
		The second of (at	time of submission)	
Dependent(s) names residing	g in the area / Ages of	Children (list o	ldest to youngest)	
Member's Departure Date: _	Family Mem	bers' Departure	Date:	
TLA Entitlement Dates: members departing requires Commanding Officer.				
TEMPORARY LODGING FACILITY I	NFORMATION			
Hotel Name:	Adequate Kitcher	n Facilities (as pe	er regulations): 🗌 Yes 🗌 No	
MEMBER CERTIFICATION				
* Certificate of Non-Availabil	lity from Navy Lodge is re	quired for alternat	te Lodging *	
HOUSING SERVICE CENTER				
TLA 🗌 is 🗌 is not recommend	led from	through		
Housing Termination Date:				
Remarks:				
Housing Representative (Print	Name) Signature		Phone Extension	
nousing Representative (Filit	Name) Signature	Date	PHONE EXCENSION	
UNACCOMPANIED HOUSING OFFICE	(Unaccompanied E4 and	below only)		
Transient Government Quarte	ers are/are not availabl	e.		
UH Representative Signature	5	Date	Phone Extension	
PRIVACY ACT STATEMENT: The authority to requ provided is used to identify the member and Department of the Navy in determining eligith is mandatory; failure to provide required in	his or her service record. The informa bility for and approving or disapproving	tion will be used to assist g of the reenlistment being	officials and employees of the requested. Completion of the form	

NAVSUPPACT Naples Form 7210/5 (Rev 01-22)