

Topic: Process for Civilian Employees of Fort Irwin to Submit an Exception to Policy (ETP) to Reside in Privatized Housing	OPR: RCI 380-6824
Reference: United States Army Garrison, Fort Irwin and the National Training Center Policy #5, Authorized Residents in Family Housing, Sample Memorandum from Commander, Exception to Policy Form from Pinnacle	

Procedure:

- The Garrison Commander is the approval authority for any request for a civilian employee of Fort Irwin to reside on the installation when excess housing is available.
- The process for a civilian employee to submit this ETP is as follows:

Civilian Employee will go through their Commander / Director and obtain a memorandum on company letterhead with their concurrence as well as their employment status (i.e., DA/DOD Civilian, Appropriated Funds (AF), Non-Appropriated-Funds (NAF), etc.). The memorandum will state how many family members, if any, names of family members, DOB, and gender.

Civilian applicant will submit the ETP through Pinnacle along with copies of their family members' drivers' license, social security card, and proof of medical insurance.

Pinnacle will forward ETP to Residential Communities Initiative (RCI) who will coordinate with Emergency Services for background check and prepare approval or disapproval memorandum for the Garrison Commander's signature.

Topic: Process for Civilian Employees of Fort Irwin to Submit an Exception to Policy (ETP) to Reside in Privatized Housing

OPR: RCI  
380-6824

Reference: United States Army Garrison, Fort Irwin and the National Training Center Policy #5, Authorized Residents in Family Housing, Sample Memorandum from Commander, Exception to Policy Form from Pinnacle

Sample memorandum from Commander / Director:



REPLY TO  
ATTENTION OF

**DEPARTMENT OF THE ARMY**

Your Unit  
FORT IRWIN, CA 92310-XXXX

OFFICE SYMBOL

MEMORANDUM FOR Commander, U.S. Army Garrison, Fort Irwin, CA 92310

SUBJECT: Request Authorization for Civilian Employee to Reside in Privatized Housing

1. Describe employee's request and list all dependents names, date of birth, and gender.
2. Indicate whether or not you concur with this request
3. Point of contact information.

*Signature*  
NAME  
RANK, BR  
TITLE

