

17 TRW HARDSHIP WAIVER REQUEST
FOR OFFICER ON-BASE HOUSING

Name: _____

Date of Request: _____

INCOME: Income prior to Active Duty Orders

Wages

Other Income

Total

\$ _____ -

Total Income after Active Duty Orders

Base Pay

BAH

BAS

Other Income

Total

\$ _____ -

Total Increase/Decrease in Income

\$ _____ -

Total add'l expenses at PLEAD incurred due to PCS:

Total add'l expenses incurred due to off-base residence:

Total Increase/Decrease in Income

\$ _____ -

Other Circumstances/additional expenses:

Vehicle:

Child Care:

Other:

Reason family did not accompany:

I attest that the information provided is accurate and that living in off-base facilities would incur a personal financial hardship.

Name: _____

Expenses at Place Entered Active Duty (PLEAD):

	Expenses Prior to Orders	Add'l Expenses after Orders
Mortgage/rent:	\$ _____	\$ _____
Transportation:	_____	_____
Vehicle loan	_____	_____
Gas/Oil	_____	_____
Lic/tax/Insp/Triple A	_____	_____
Maintenance	_____	_____
Utilities:	_____	_____
Child care:	_____	_____
Insurance:	_____	_____
Vehicle	_____	_____
Medical	_____	_____
Life	_____	_____
Medical:	_____	_____
Education:	_____	_____
Credit Card:	_____	_____
Savings/Investments:	_____	_____
Other expenses:	_____	_____
	_____	_____
Other Loans:	_____	_____
	_____	_____
	_____	_____
Subtotal	\$ _____ -	\$ _____ -

Total Expenses PLEAD: \$ _____ -

Expenses at Goodfellow to maintain additional residence:

Rent:	_____
Vehicle expense:	_____
Gas/Oil	_____
Lic/tax/Insp/Triple A	_____
Maintenance	_____
Utilities:	_____
Other expenses:	_____

Total Add'l Expenses @ GAFB: \$ _____ -

Total Additional Expenses: \$ _____ -