

Residential Communities Initiative  
California Military Communities, LLC.  
**ROOMMATE EXCEPTION TO POLICY**

APPLICANT INFORMATION

Full Name:

Rank:

Phone:

Unit:

Unit Phone:

CO-APPLICANT INFORMATION

Full Name:

Rank:

Phone:

Unit:

Unit Phone:

I certify that I am not a subordinate, supervisor, or within the chain of command of the co-applicant on this exception to policy. Further, I understand that should I become the co-applicant's subordinate, supervisor or within their chain of command, I will report to RCI to make arrangements to terminate housing/lease.

Applicant's Signature:

Date:

Company Commander's Recommendation: Concur / Non-Concur (circle one)

Company Commander's  
Signature:

Date:

Battalion/Squadron Commander's Recommendation: Concur / Non-Concur (circle one)

Battalion/Squadron Commander's  
Signature:

Date:

Brigade/Regimental Commander's Recommendation: Concur / Non-Concur (circle one)

Brigade/Regimental Commander's  
Signature:

Date:

COMMENT:

RCI RECOMMENDATION

RCI Recommendation: Concur / Non-Concur (circle one)

RCI Director's Signature:

Date:

COMMENTS:

GARRISON COMMANDER'S APPROVAL/DISAPPROVAL

Approval / Disapproval

Garrison Commander's Signature:

Date:

COMMENTS: