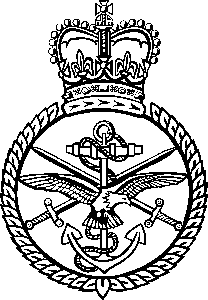
**ANNEX A TO CHAPTER 4**

**APPLICATION AND ALLOCATION PROCESS**

**MOD Form 1132**

(**Revised 04 Jun 18)**

**MINISTRY OF DEFENCE**

**APPLICATION TO OCCUPY SERVICE FAMILY ACCOMMODATION (SFA)**

THIS FORM IS AVAILABLE ELECTRONICALLLY FOR APPLICATIONS OF SFA IN THE UK ONLY, IF YOU HAVE ACCESS TO THE DEFENCE INTRANET AND HAVE AN ACTIVE MOD E-MAIL ADDRESS

Please go to:[**https://e1132.domis-r.r.mil.uk/e1132/**](https://e1132.domis-r.r.mil.uk/e1132/)for more details

NHPHD / Overseas Command Application No.:-

(Only for NHPHD / Office Use)

Please ensure that you complete all sections of the form in BLOCK CAPITALS and black ink. Failure to do so may result in your form being returned and delay your application.

**Important – before completing this form, please read the guidance notes on page 9**

**PART 1: BASIC PERSONAL APPLICATION DETAILS**

**Note: complete Part 1 with personal details applicable at new occupation date.**

|  |  |  |  |
| --- | --- | --- | --- |
| Service: (RN, Army, RAF, FTRS (FC/LC/HC), MPGS, NRPS) |  | Service Number: (or MOD Civilian Staff Number) |  |
| Rank or Title: (e.g. Wg Cdr / Sgt / Mrs) |  | Chaplains / Civilians Overseas: Equivalent Military Rank |  |
| Forename(s): |  | Surname: |  |
| Date of Birth (dd/mm/yy): |  | Gender (M/F): |  |
| Enlistment / Commission Date (dd/mm/yy): |  | Discharge / Termination Date (dd/mm/yy) |  |
| Personal Status (PStat) Category (JSP 752 Ch 1 Sect 4) on occupation: |  | Date of impending Marriage / Civil Partnership |  |
| E-Mail address: (if applicable) | |  | |
| Address where correspondence / offer should be sent (i.e. your current accommodation address):  to:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  Postcode/BFPO \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  Contact Tel No: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ (inc Std / Intl / Mil code where applicable)  Mobile Tel No: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | | | |

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| Are you assuming a designated ‘in Command’ appointment (See Note 3). In the event of uncertainty, clarification will be provided by sS Housing Colonel Staffs. | | Yes |  | No |  |
|  |  |  |  |
| If ‘In Command’: what is your appointment? |  | | | | |

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| *Are you a Foreign & Commonwealth applicant not serving in the UK Armed Forces? (Y/N):* | Yes |  | No |  |

***Non-British Forces Personnel only:***

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| *Nationality* |  | | | |
| *Are you serving in a designated Exchange Appointment?* | *Yes* |  | *No* |  |

Complete the following table with the permanently resident members of your family (including Spouse / Civil Partner) for whom you require SFA; (See Note 4 as to which children should be included).

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| Title  (Mr/Mrs etc.) | Surname | Forenames | Gender  M/F | DOB (or due date)  dd/mm/yy | Relationship to Applicant | Need to enrol in local school - Y/N |
|  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |
| Date baby due (if applicable) | | | |  |  |  |

**Before completing this section you are required to confirm your entitlement / eligibility to Service Family Accommodation (SFA) in accordance with the relevant JSP 464 Part 1 (UK) or Part 2 (Overseas). Tick the box that reflects your correct entitlement or eligibility for this application.**

I verify that this application is for SFA:

(Tick one box as appropriate)

|  |  |
| --- | --- |
| A new allocation to entitlement at my new Duty Station / Port Area (incl SSFA notice to vacate) |  |
| Entitlement by Virtue of Appointment (In Command / VCDS List) |  |
| An entitled transfer at my current Duty Station / Port Area. |  |
| An allocation to entitlement iaw JSP 464 Part 1 Para 0405b for Extended Duration Operational Tours in UK. |  |
| A request to RETAIN current SFA on posting within the Base Port Scheme (RN Only) |  |
| To RETAIN SFA to entitlement for (insert reason below iaw relevant JSP 464 retention  regulations): \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  (Please attach justification for retention – i.e. CEAS Impact Statement etc.) |  |
|  |
| A transfer of SFA for additional needs and disability requirements (your application should be supported by authoritative medical evidence or Occupational Therapist’s report). |  |
| A transfer of SFA for welfare reasons (Your application should be supported by a welfare report). |  |
| A non-entitled transfer of SFA for personal / lifestyle reasons (Not for occupants of SSFA) |  |
| A request for temporary SURPLUS SFA. Please confirm whether or not you will be occupying the surplus SFA during the working week or supply confirmation of alternative accommodation, i.e., authorisation of Form 1154 Application for SSSA or SLA address. |  |
| A request to RETAIN current SFA on posting on an ELIGIBLE basis. |  |

**PART 2: FUTURE HOUSING REQUIREMENTS (ON ASSIGNMENT ETC)**

|  |  |
| --- | --- |
| **JPA Assignment Order Reference and Date Issued (dd/mm/yy): (See note 5)** |  |
| Ship/Shore based Unit/Station assigned to and location (complete as many details as are known):  Job / Post Title: | Point of Contact (if known):  Full Unit Address:  Postcode / BFPO:  Email (if known):  Military Tel No:  Civilian Tel No:  (Inc Std / Int Dial Code) |
| Assignment Date (dd/mm/yy) (Joining date at new unit): |  |
| Date Occupation of SFA required (dd/mm/yy)  (Date should be no more than 4 weeks prior to assignment date. See Note 6) |  |

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| If you are posted to MOD London, is your new appointment on the VCDS 45 Minute List? | Yes |  | No |  |
| Expected End Date of Future Assignment (as per JPA Assignment Order) (dd/mm/yy) |  | | | |
| Receiving Unit ‘Unit Indicator Number’ (UIN) |  | | | |
| Do you have additional needs that may require adapted accommodation? | Yes |  | No |  |
| If yes, please support this application with the appropriate authoritative medical certificate or Occupational Therapists (OT) report / written evidence by an appropriate professional. | | | | |
| Do you require a copy of the ‘Disability and Additional Needs’ guide for Parents & Carers’ | Yes |  | No |  |
| **Note: If you are currently in adapted SFA, please attach your current OT report; A further report may be required for the new SFA. (JSP 464 Pt 1 - Ch 4)** | | | | |

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **FOR OVERSEAS COMMANDS ONLY – Not BF Germany / PJOBs** | | | | |
| If SFA is unavailable at the time you require it, or retention of your present SFA is not agreed, will you: | | | | |
| Accept Overseas Rental Allowance (ORA) | Yes |  | No |  |
| Make private arrangements | Yes |  | No |  |

**PART 3: CURRENT ASSIGNMENT DETAILS**

|  |  |  |  |
| --- | --- | --- | --- |
| Current Unit Details: |  | | |
| Full Place of Duty Address: |  | | |
| Postcode / BFPO: |  | UIN: |  |
| Email: |  | | |
| Military Tel No: |  | | |
| Civilian Tel No: |  | | |
| Fax No: |  | | |

**CURRENT HOUSING ARRANGEMENTS** Is your current home:

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| SFA in UK? | Yes |  | No |  |
| If your current home is SFA / Substitute SFA managed by DIO Accommodation, enter the address and read Note 7 regarding Notice to Vacate / Move Out requirements. |  | | | |
| SFA in an overseas location? | Yes |  | No |  |
| *Rented on ORA (Applicable to Overseas Stations Only)* | Yes |  | No |  |
| Private accommodation? | Yes |  | No |  |
| If Private, what is the postcode of the property? |  | | | |
| Single Living Accommodation (or Substitute Service Single Accommodation (SSSA))? | Yes |  | No |  |
| Substitute Service Family Accommodation? | Yes |  | No |  |
| Do you own a property within 50 miles from your new place of duty which you have purchased / extended with the aid of an extant LSAP or FHTB loan (JSP 464 Part 1 Ch 3 / JSP 464 Part 1 Ch 11/JSP 752 Ch 2) | Yes |  | No |  |

**PREFERENCES**

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **All applicants to Answer:** | | | | |
| Would you like a garage | Yes |  | No |  |
| **If Yes, please complete the garage application form attached.** | | | | |
| Do you have any large pets (dogs/cats etc)? | Yes |  | No |  |
| **If yes, please complete Annex B (Permission for Pets to be kept in SFA).** You are advised to make yourself familiar with the additional cleaning requirements for pets at move out – JSP 464 Pt 1 or 2 Chap 7 - and sign that you understand the requirements placed upon you if permission is granted. | Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | | | |

**PREFERRED LOCATIONS** You may state up to 3 preferred areas and/or estates, but not specific roads. (See Note 8)

|  |  |
| --- | --- |
| (1): |  |
| (2): |  |
| (3): |  |

**EXTENDED DURATION DEPLOYMENT OPTIONS**

Note:- If you are applying for SFA in a specific area under the rules for Extended Duration Operational Tours (JSP 464 Pt 1 Para 0505b), please complete the following section to assist the NHPHD to allocate you the most appropriate property to the area you wish to move to. The SFA allocated may be outside normal radii and SSFA will only be procured in exceptional circumstances:-

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| The area requested is close to: | Family: |  | Unit (Base Port / Regt / Station): |  |
| Relationship & Full Address of Relatives: |  | | | |
| Full Service and/or Parent Unit Address: |  | | | |

**PART 4: DATA PROTECTION ACT 2018**

***PLEASE NOTE***

**I understand and accept that in pursuing this application the Defence Infrastructure Organisation and their contracted agents may use the data provided in connection with activities concerned with the provision and improvement of the Service Families Accommodation service. I understand and accept that the Defence Infrastructure Organisation may be required to release certain information to external agencies, agencies and bodies within the MOD (e.g. Pay/Record Offices, Local Commands etc.) and that this will take place in accordance with the provisions of the Data Protection Act 2018.**

**PART 5: SIGNATURE OF APPLICANT**

Please recheck the information given is correct and that your requirements are clearly stated and sign below. Please **You are reminded it is a disciplinary offence to knowingly give false information. (See Note 9).**

I will inform the NHPHD and my Chain of Command of any change in assignment or duty location which affects this application. I am aware that should I fail to comply with these regulations, then my publicly provided accommodation and allowance entitlements will be subject to formal review and may be withdrawn.

|  |  |  |  |
| --- | --- | --- | --- |
| SIGNATURE OF APPLICANT |  | DATE |  |

|  |  |
| --- | --- |
| **PART 6: DECLARATION BY RESPONSIBLE OFFICER** (Not to be completed by Applicant)   |  | | --- | | (To be completed by the Divisional / Unit Admin / Families / PSF officer at **WO level or above**).    **I certify that the mandatory information given at Parts 1, 2 and 3 of this Application has been checked and is correct:**  Responsible Officer’s Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  Rank and Full Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  Appointment: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  Email Address: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  Military Telephone Number: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  Civilian Telephone Number: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_­\_ UNIT STAMP | |

**FURNISHING REQUIREMENTS**

**Send one copy of the completed form to the Housing Provider serving the Shore Based Unit/Station where you seek accommodation, and one copy to the Ship/Shore based Unit/Station which you are currently assigned.**

TO BE COMPLETED BY THE APPLICANT AND SUBMITTED BY YOUR LOCAL HOUSING PROVIDER TO THE APPROPRIATE SERVICE SUPPLY ORGANISATION AT LEAST 10 WORKING DAYS BEFORE THE DATE THE FURNITURE IS REQUIRED. **THIS DOES NOT APPLY FOR ASSIGNMENTS TO GIBRALTAR.**

|  |  |  |
| --- | --- | --- |
| No | Rank | Name |
| SHIP/UNIT/STATION  To be assigned to: |  |  |

|  |  |
| --- | --- |
| Address Allocated (NHPHD use only) | Date of Move In |
|  |  |

Number of Children (insert age in relevant box):

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
| Male: |  |  |  |  |  |  |  |
| Female: |  |  |  |  |  |  |  |

Do you require any furnishings (See Note 10.) **Yes / No**.

**Please indicate in the column [QTY REQ] the quantity of each item you would like in your SFA. DAS items requested are subject to alteration dependent upon the size and type of SFA allocated and your entitlement which is listed in the joint service scales contained in JSP 308. The figures shown below give the average quantities as a guide. It should be noted that other than the DAS items provided in an unfurnished SFA, all other DAS items are issued on request and reflect the furnishing charge of part or fully furnished.**

**NOTE –** The following items remain in SFA irrespective of its furnishing state: carpets, curtains, cooker, door mats, dustbin, shower curtain, smoke alarms and CO alarms (where appropriate).

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| ITEM | AV  ENT | QTY  REQ | ITEM | AV  ENT | QTY  REQ |
| BED DOUBLE & MATTRESS | 1 |  | TABLE NEST OF 3 | 1 |  |
| BED SINGLE & MATTRESS | 2 |  | TABLE OCCASIONAL | 1 |  |
| BUNK BED (Children Only) | 1 |  | STOOL BATHROOM | 1 |  |
| DRESSING TABLE + MIRROR | 1 |  | STOOL STEP KITCHEN | 1 |  |
| CHEST OF DRAWERS | 2 |  | DESK (with 3 drawer pedestal) + CHAIR | 1 |  |
| STOOL DRESSING | 1 |  | WARDROBE see note | 1 |  |
| BEDSIDE CABINET | 4 |  | BOARD IRONING | 1 |  |
| SETTEE 2/3 SEAT (with covers) | 1 |  | CHAIR HIGH CHILD | 1 |  |
| CHAIR EASY (with covers) | 2 |  | COT CHILD & MATTRESS | 1 |  |
| SIDEBOARD | 1 |  | STAIR & DOOR GATE INFANT | 1 |  |
| BOOKCASE | 1 |  | PLAYPEN CHILD | 1 |  |
| CHAIR DINING | 8 |  | VACUUM CLEANER | 1 |  |
| TABLE DINING | 1 |  | BRUSH WC + CONTAINER | 1 |  |
| SIDE TABLE | 1 |  | GARDEN TOOLS SET | 1 |  |
|  |  |  |  |  |  |

GET-YOU-IN/OUT-PACKS – **I DO / DO NOT** REQUIRE A GET-YOU-IN/OUT-PACK (DELETE AS NECESSARY) These are issued as complete packs and contain bedding, cutlery, crockery, kettle, iron and kitchen utensils. They are issued on a temporary basis only and must be returned complete within 6 weeks of occupation.

**FOR LOCAL HOUSING PROVIDER USE ONLY**

|  |  |
| --- | --- |
| Entitlement (by SFA Type) |  |
| Entitlement to Tied SFA? |  |
| Entitlement to Ex Officio SFA? |  |

|  |  |  |
| --- | --- | --- |
| Address of allocated SFA |  | |
| Occupation Date |  |  |

Any additional details that may be relevant may be commented upon below:

|  |
| --- |
|  |

Accommodation required to be assessed by the Furnishing Authority on the basis of items selected

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| Fully Furnished |  | Part Furnished |  | Minimum Scaled |  |

|  |  |  |
| --- | --- | --- |
| Furnished to Scale: | FULL |  |
| Part furnished | PART |  |
| Unfurnished | UNF |  |
| Non-applicable (non crown employees) | NA |  |

|  |
| --- |
| Allocations Notes: |

**GUIDANCE NOTES FOR THE COMPLETION OF THE SFA APPLICATION FORM**

**(MOD FORM 1132)**

1. All sections of the form must be completed in black ink and in block capitals. Please complete legibly and with as much detail as possible.
2. The completion of all sections of the form is mandatory. Without the information requested it will not be possible for your Housing Provider to process the application. This may result in the form being returned to the applicant and a subsequent delay in allocating you SFA. Chaplains, Civil Servants and Civilians where entitled/eligible should provide military equivalent rank to ensure allocation of SFA to the appropriate entitlement.
3. Personnel filling “In Command” appointments may be provided with SFA which is ex-officio / tied to the particular appointment. The entitlement will be deemed to exist if the applicant exercises Commanding Officers Powers of Punishment as defined within the Armed Forces Act 2006. In cases of doubt, the appropriate Housing Colonel will arbitrate.
4. The number of people expecting to live in a property could influence the SFA to which you are entitled. All dependent children living with you (including those at boarding school) and for whom you and/or your spouse/civil partner have legal custody and you can demonstrate that you are legally the prime mover should be entered. Live in nannies for children / and au pairs who have been the subject of specific approval should be included. Expected date of birth for baby(ies) due should also be entered on the form. Single Service personnel approved for adoption will be entitled to occupy SFA from the date of approval given the need to establish a home prior to any child being placed with the adoptive parent. See JSP 464 Chapter 1 for detailed regulations.
5. Your assignment information is stated on your Assignment Order.
6. There is no entitlement to SFA prior to the date of assignment (unless vacating tied/ex-officio SFA or posted in to UK from overseas or from UK to overseas). The Housing Provider will make every effort to meet your required date up to a maximum of 4 weeks prior to your assignment date. You should not book removals / make schooling arrangements etc. until you have received and accepted your formal offer of allocation.
7. If you currently occupy SFA you are required to notify your current Housing Provider that you are assigned within 14 days of receipt of your Assignment Order (unless you are deployed on operations or at sea when this may not be possible, in which case you are to notify your Housing Provider within 14 days of your return). If you currently occupy SSFA, you should also notify the MOD contractor by giving them the appropriate Notice as per your Licence to Occupy (usually 40 days).
8. Preferred Locations: For an entitled move the NHPHD will try and allocate SFA in your preferred location; if the preferred location is not available, the NHPHD will allocate as close as possible to the Duty Station.
9. Once the 1132 form is completed, data submitted may be cross-referenced with JPA records. Disciplinary action may be taken if you knowingly submit incorrect / withhold information that affects your entitlement to accommodation.
10. You should select which (if any) further items of furniture you wish to have included in your SFA (except Gibraltar). Your selection will be assessed by the respective Furnishing Authority; this normally occurs when you move in to the SFA, on the basis of the numbers and nature of the items requested. You will be advised of this assessment and the impact it will have on the SFA charge you will pay.

|  |
| --- |
| If you have any further queries over the completion of this Application Form you should contact your local Housing Provider for advice.  Policy for the provision of SFA is contained in Tri-Service Accommodation Regulations  – JSP 464 (Vol 1 Part 1 – UK & Overseas) |

**MOD FORM 1132**

**GARAGE APPLICATION**

The Service Family Accommodation (SFA) allocated to you may not have a garage attached to the property. Please would you indicate below whether you would like one. If there is no garage within the curtilage of the property, on receipt of your application you will either be allocated a standalone in the vicinity of your SFA or placed on a waiting list for the next suitable garage.

You are reminded that private vehicles and/or personal effects are stored in the garage at your sole risk and the Department and/or its agents will not accept any liability for loss or damage to such property when stored in the garage.

I wish to apply for a garage Yes No

From (date) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

(To be completed by your Local Housing Provider)

**OFFICE USE ONLY**

Date application received \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Offer letter sent Yes No

Waiting list letter sent Yes No

Signature \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date \_\_\_\_\_\_\_\_\_\_\_\_\_\_

**MOD FORM 1132**

**Application to Keep a Pet(s) in Service Family Accommodation**

***(For completion by Licensee)***

|  |  |
| --- | --- |
| *Name of Licensee* |  |
| **Rank** |  |
| **Service Number** |  |
| **Contact Tel No** |  |
| **SFA Address** |  |

*Use a separate entry for each pet.*

|  |  |  |  |
| --- | --- | --- | --- |
| *Type of Pet*  (JSP 464 Pt 1 Para 0619b) | *Breed* | *Colour* | **Is pet caged?**  **Yes / No** |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |

I have read, and understand that it is my responsibility to keep the pet(s) under control at all times.

Signature…………………………………………….

Name (Block Capitals)…………………………….

Date………………………………………………….

Please return the completed form to the NHPHD.

**RULES FOR KEEPING PETS IN SFA**

1. The name and address of the owner must be inscribed on the dog’s collar.

2. The Licensee is responsible for keeping the pet(s) under control at all times.

3. The pet(s) must be prevented from causing nuisance, including barking and fouling footpaths.

4. The owner/Licensee must comply with the Dangerous Dogs Act 1991 if applying to keep a dog(s). The act lists the following dogs as dangerous:

* Pit-Bull Terrier
* Japanese Tosa
* Dogo Argentino
* Fila Braziliero

5. Dogs are not permitted in children’s play areas.

6. The Licensee is to ensure that pet(s) do not damage the fabric of the building, spoil the make up of the garden area or cause damage to perimeter fencing/boarding.

1. Permission will only be considered for the pet(s) listed. Permission must be sought on an individual basis should further pets be acquired.
2. The Licensee is to notify NHPHD if there is any change to the information provided.
3. The Licensee must ensure that carpets, floor coverings, fixtures and fittings are left clean and free of infestation and make good gardens spoilt by animals prior to move out of SFA. Failure to do so may result in charges being raised against the individual.

10. NHPHD retains the right to revoke permission to keep a pet(s) should any of the above rules be contravened, in accordance with JSP 464 Chapter 7. If for any reason, permission to keep a pet is revoked, the owner/licensee is to make arrangements for the animal(s) to be re-housed within 2 weeks of written notification being received.

11. You must not bury deceased pets in the garden of the SFA or on any MOD communal land under any circumstances.