

**MOVE-IN HOUSING ALLOWANCE CLAIM  
FOR PERSONNEL OCCUPYING PRIVATELY LEASED/OWNED QUARTERS OVERSEAS**

*(Read Privacy Act Statement, Warning, and Instructions on reverse before completion)*

**PART A - SERVICE MEMBER IDENTIFICATION AND HOUSING INFORMATION**

<b>1. NAME</b> <i>(Last, First, Middle Initial)</i>		<b>2. PAY GRADE</b>	<b>3. SOCIAL SECURITY NUMBER</b>
<b>4. DUTY STATION OR HOMEPORT</b>		<b>b. LOCATION CODE</b> <i>(Official Use)</i>	<b>5. RESIDENCE ADDRESS</b> <i>(Street, Apt. No., City, Country)</i>
<b>a. DUTY STATION NAME</b>			
<b>c. CITY</b>	<b>d. COUNTRY</b>	<b>e. DUTY TELEPHONE NO.</b>	

**PARTS B – E – EXPENSES ASSOCIATED WITH OCCUPYING RENTED/OWNED QUARTERS**

<b>a.</b> <b>EXPENSE ITEMS</b> <i>(List all expense items in Parts B – E below. Enter "None" if appropriate. If a sharer, only one sharer may report an expense item. Report all amounts in dollars and cents. Refer to the DoD Move-in Housing Allowance (MIHA) Process Guide to determine what can and cannot be reported.)</i>	<b>b.</b> <b>AMOUNT CLAIMED</b> <i>(If payment made in foreign currency, convert to dollars at actual conversion rate.)</i>	<b>c.</b> <b>AMOUNT ALLOWED</b> <i>(If certifier excludes any amount, provide explanation on separate sheet.) (Official Use)</i>
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**PART B - RENT-RELATED EXPENSES** *(Not applicable to homeowners)*


**6. PART B SUBTOTAL** *(Official Use)* ➔

**PART C - SECURITY-RELATED EXPENSES** *(Allowed only in selected areas. See DoD MIHA Process Guide)*


**7. PART C SUBTOTAL** *(Official Use)* ➔

**PART D – INFECTIOUS DISEASE-RELATED EXPENSES** *(Allowed only in selected areas. See DoD MIHA Process Guide)*


**8. PART D SUBTOTAL** *(Official Use)* ➔

**PART E – SAFETY-RELATED EXPENSES** *(Allowed only in selected areas. See DoD MIHA Process Guide)*


**9. PART E SUBTOTAL** *(Official Use)* ➔

**PART F - REIMBURSEMENT TO MEMBER** *(Official use only. Service member – skip to Part G)*

<b>10. AMOUNT FROM LINE 6</b>		
<b>11. AMOUNT FROM LINE 7</b>		
<b>12. AMOUNT FROM LINE 8</b>		
<b>13. AMOUNT FROM LINE 9</b>		
<b>14. AMOUNT DUE MEMBER</b> <i>(Sum of Lines 10 through 13)</i>		

**PART G - CERTIFICATIONS**

**15. SERVICE MEMBER. I certify that the information reported in Parts A - E is true and correct.**

<b>a. SIGNATURE</b>	<b>b. DATE SIGNED</b> (YYYYMMDD)
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**16. HOUSING OFFICER OR DESIGNATED AUTHORIZING/APPROVING OFFICIAL. I have reviewed this claim and certify that the information was properly reported. I have entered monthly rent (in dollars using Part B conversion rate, if appropriate) and total sharers from the member's DD Form 2367. (If homeowner, report "rent" as original purchase price divided by 120.)**

<b>a. RENT</b>	<b>b. TOTAL SHARERS</b>	<b>c. TITLE</b>	
<b>d. SIGNATURE</b>			<b>e. DATE SIGNED</b> (YYYYMMDD)

## PRIVACY ACT STATEMENT

**AUTHORITY:** Title 10 U.S.C § 136, - Under Secretary of Defense for Personnel and Readiness; Title 37 U.S. Code § 403 - Basic Allowance for Housing, and E.O. 9397 (SSN), as amended.

**PRINCIPAL PURPOSE(S):** To determine eligibility for and authorize payment of selected one-time costs associated with occupying privately leased/owned housing.

**ROUTINE USE(S):** In addition to being used by officials and in determining payment eligibility, the information provided herein may be provided to law enforcement personnel investigating those suspected of fraudulently obtaining payments, and to other Federal agencies, members of Congress, State and Local government, and U.S. and State courts. Additional routine uses are listed in the applicable system of records notices:

USAF, <https://dpclid.defense.gov/Privacy/SORNsIndex/DOD-wide-SORN-Article-View/Article/569732/f032-af-ce-b/>  
USA, <https://dpclid.defense.gov/Privacy/SORNsIndex/DOD-wide-SORN-Article-View/Article/570004/a0210-50-daim/>  
USN & USMC, <https://dpclid.defense.gov/Portals/49/Documents/Privacy/SORNs/Navy/NM11101-1.pdf?ver=2018-10-26-094746-480>  
DFAS, <https://dpclid.defense.gov/Privacy/SORNsIndex/DOD-wide-SORN-Article-View/Article/570191/t7340/>  
DMDC, <https://dpclid.defense.gov/Privacy/SORNsIndex/DOD-wide-SORN-Article-View/Article/570563/dmdc-01/>

**DISCLOSURE:** Voluntary; however, failure to provide the SSN may preclude timely consideration of your request for payment determination.

**WARNING:** Making a false statement or claim against the U.S. Government is punishable by courts-martial. The penalty for willfully making a false claim or a false statement in connection with claims is a maximum fine of \$10,000 or imprisonment for five years, or both.

## INSTRUCTIONS

Entitlement claims for the Move-In Housing Allowance (MIHA) are covered by two forms. This form covers qualifying rent-, security-, safety-, and infectious disease-related expenses (Parts B - E) and should be completed only if the member incurs such expenses. Miscellaneous expenses are covered by the DD Form 2367, "Individual Overseas Housing Allowance (OHA) Report." To qualify for MIHA, a member must be eligible for OHA. Additional rules and detailed instructions for completing this form and DD Form 2367, are contained in the DoD Financial Management Regulation, Volume 7A, Chapter 26.

To qualify for full or partial reimbursement for Part B, C, D, or E expenses, receipts/documents showing actual costs must be provided. If expense reported in Part B, C, D, or E is incurred in foreign currency, convert to dollars using the rate the member actually converted dollars to foreign currency. If the member is a "sharer" under the OHA program, only one sharer can claim an individual Part B, C, D, or E expense. Members may submit more than one form while assigned to a duty location (e.g., to claim rent-related expenses (Part B), then again to claim security expenses (Part C)).

MIHA covers only reasonable costs. Accordingly, the Services place a significant responsibility on the approving official to exclude extraordinary, unjustifiable expenses.

There are five MIHA categories:

**MIHA/Rent** (covered by Part B). These are typically one-time, non-refundable charges levied by the landlord/agent or a foreign government which the member must pay before or upon occupying the unit. Examples are real estate agent's fees, redecoration fees, and one-time lease taxes. Refundable security deposits and advance rental payments cannot be reported. Recurring costs are also excluded.

**MIHA/Security** (covered by Part C). May be completed only by members assigned to areas where dwellings must be modified to minimize exposure to terrorist threat. Qualifying areas are listed in the MIHA Process Guide. Examples of permissible items are security doors, bars, locks, lights, and alarm systems. Expenditures which are not related to the physical dwelling, such as for personal security guards or dogs, are not permitted. Qualifying areas are listed in the DoD MIHA Process Guide.

**MIHA/Infectious Disease** (covered by Part D). May be completed only by members assigned to areas where dwellings must be modified to minimize exposure to medical threats related to vector-borne diseases transmitted through mosquitos. Qualifying areas are listed in the MIHA Process Guide. Examples of permissible items are window/door screens. Qualifying areas are listed in the DoD MIHA Process Guide.

**MIHA/Safety** (covered by Part E). May be completed only by members assigned to areas where the Department of State has required safety upgrades to their dwelling. Qualifying areas are listed in the DoD MIHA Process Guide.

**MIHA/Miscellaneous** (covered by DD Form 2367). This category reflects average expenditures made by members to make their dwellings habitable.