

FILING A TLA CLAIM/EXTENSION

Military Members Only

File TLA in 10 Day Increments: Newly arrived personnel will file their TLA claims in 10-day increments. As a reminder, **Packet 1, Section 3**, Understanding TLA, has preliminary TLA information. That information still applies, but this Section gets into the details for required documentation dependent on your situation. USAFE guidance requires military members to aggressively search for quarters (view a minimum of 12 houses) within your first 30 days.

Assistance: If permanent housing has not been secured after 20 days, necessitating a third 10-day TLA increment, you **must** meet with a Housing Counselor for assistance in securing a house and/or justifying additional TLA claims.

Short Term Lease Contract Option: If you cannot justify TLA approval beyond 30 days, you will be advised to initiate a “short term lease”. DO NOT wait until day 29 to start this process, you need to timely work this option with a housing counselor to ensure a smooth transition is maintained. This short-term lease option allows you to wait for a particular unit or allows you to continue the search for housing that meets your personal preference. With this option, your Overseas Housing Allowance (OHA) at the rental amount or your OHA cap, whichever is lower, plus your utility allowance will start to offset the short-term lease cost. Reimbursement of meals is not authorized while receiving OHA. You should not incur any out-of-pocket expenses. Shop around for best price. Refer to **Packet 3, Section 5** for more detailed information.

How to file a TLA Claim: File AF Form 1357, *Request for Temporary Lodging Allowance*, every ten days. Please provide the Housing Office with copies of the following items:

- AF Form 1357 filled out and signed. Sample form is at Page 3 and forms are available in the Housing Office lobby area. There are instructions below for completing this form.
- One copy of the hotel PAID RECEIPT showing charges for 10 days. If residing with a friend you can only claim “MEALS ONLY”, meal receipts are NOT required.
- One copy of PCS orders and amendments.
- If staying off Base, copy of NON-AVAILABILITY statement issued by 31FSS/SVML (Lodging)
- Quarters Visited form (**Packet 2, Section 1**)

Instructions for completing AF Form 1357, *Request for Temporary Lodging Allowance*:

- Name of Member – self-explanatory
- SSN – self-explanatory
- Last Permanent Duty Station – self-explanatory
- Date of Departure – from Last Permanent Duty Station
- PCS Order Number – self-explanatory
- Date of Arrival – self-explanatory
- **Type Action Requested/Payment Identification**
 - There are 3 selections in the first line to choose from; if you just arrived or are leaving you choose TLA Arrival or TLA Departure respectively. If you have arrived and already completed a TLA claim, but need to do another you choose TLA Interim
 - There are 4 selections in this second line to choose from; self-explanatory
- **Travel and Living Allowance (TLA) Authorized for:**
 - There are 4 selections in this first line to choose from; all are self-explanatory, but if you are checking Member and ___ Dependent(s) remember to fill in the number of your dependents
 - There are 2 selections in this second line to choose from; you’re accompanied or not

- There are 2 selections in this third line to choose from; info should be on your orders
- **Authorized Dependents**
 - Self-explanatory – provide a complete list of all your dependents
- **Identification of Temporary Quarters**
 - Self-explanatory – provide the requested info whether you are temporarily living on or off base
- **Certificate of Housing Officer**
 - To be completed by the housing officer
- **Certificate of Transportation**
 - Skip this section
- **Certificate of Billeting Officer**
 - Skip this section

A Copier is available in the Housing Office lobby: please have the package complete before you sign in to see a Housing Counselor. The counselor will review and approve your claim. The processed claims and allowances are collected by a Finance representative daily-

TLA Approval Authority and Extensions: After the initial 30 days, you must have TLA approved in ten-day increments by 31 CES/CC. Any search taking over 60 days, requires Wing Commander approval. **Extensions may only be granted in very limited and extreme circumstances beyond your control.** Examples of authorized reasons “beyond the member’s control are:

- Temporary furnishings are not available
- Acts of God, i.e. fire/flood/earthquake, which made the house uninhabitable.
- Unexpected withdrawal of your selected house from the market by the landlord
- Member or dependents are/were hospitalized resulting in curtailment of housing search
- Member’s mission essential duties curtailed housing search
- Suitable/adequate houses are unavailable even with Housing Office assistance

Additional TLA will be granted if the housing manager determines insufficient referral listings are available in the member’s grade/bedroom category or for reasons beyond the member’s control as stated above. For TLA extensions to be approved, it is imperative that you document your search on the Quarter’s Visited form (**Packet 2, Section 1**) and have adequate justifications for declining a unit (refer to DoD Community Housing Acceptability Criteria **Packet 2, Section 1**). TLA cannot be extended for personal reasons: i.e. the landlord will not accept a pet, you want to rent a single unit, you desire to live in a certain area or within certain commute time, or, if you do not timely schedule appointments with FMS or Home Fuels.

Any request for additional TLA must be submitted to the Housing Office in writing and endorsed by your Squadron Commander, together with copy of the Quarters Visited form (NOTE: this form is mandatory, requests will be returned if this form is not provided). Additional TLA requests must be submitted as soon as possible to allow time for processing. Sample memos are at page **4-5** of this Section; one example if adequate quarters are not available and the other example is for reasons beyond a member’s control.

REQUEST FOR TEMPORARY LODGING ALLOWANCE

(Check and complete all applicable blocks)

AUTHORITY: 37 USC 405, 405a, EO 9397, November 1943.

PRINCIPAL PURPOSE(S): To start, adjust, or terminate military member's entitlement to temporary lodging allowance

ROUTINE USES: Used to adjust member's military pay record. Information may be disclosed to Air Force components such as Major Commands and AF installations; other DoD Components such as Army, Navy, or Marine Corps; DFAS; other Federal agencies such as the IRS, Social Security Administration, the Department of Veterans' Affairs, and the Department of Justice for investigating or prosecuting possible violations of the law; state and local governments; US and state courts; and various other law enforcement agencies. SSN is used for positive identification.

DISCLOSURE IS VOLUNTARY: Non-disclosure will adversely affect military member's net pay. Disclosure of SSN is voluntary.

NAME OF MEMBER (Last, first, middle initial)	SSN
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LAST PERMANENT DUTY STATION	DATE OF DEPARTURE	PCS ORDER NUMBER	DATE OF ARRIVAL
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TYPE ACTION REQUESTED/PAYMENT IDENTIFICATION

<input type="checkbox"/> TLA - ARRIVAL	<input type="checkbox"/> TLA - DEPARTURE	<input type="checkbox"/> TLA - INTERIM	
<input type="checkbox"/> INITIAL PAYMENT	<input type="checkbox"/> INCREMENTAL PAYMENT	<input type="checkbox"/> FINAL PAYMENT	<input type="checkbox"/> ADJUSTMENT

TRAVEL AND LIVING ALLOWANCE (TLA) AUTHORIZED FOR

<input type="checkbox"/> MEMBER ONLY	<input type="checkbox"/> MEMBER AND DEPENDENT(S)	<input type="checkbox"/> DEPENDENTS ONLY
INDIVIDUAL ELECTED TO SERVE:	<input type="checkbox"/> ACCOMPANIED TOUR	<input type="checkbox"/> ALL OTHERS TOUR
TRAVEL OF DEPENDENT(S) IS AUTHORIZED:	<input type="checkbox"/> TO A DESIGNATED LOCATION	<input type="checkbox"/> CONCURRENT

AUTHORIZED DEPENDENTS

NAME (Last, first, middle initial)	RELATIONSHIP	DATE OF BIRTH (Children only)

IDENTIFICATION OF TEMPORARY LODGING

NAME OF HOTEL OR ACCOMMODATION	STREET NUMBER AND NAME	CITY, STATE OR COUNTRY
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INCLUSIVE DATES FROM _____ TO _____	COOKING FACILITIES? <input type="checkbox"/> YES <input type="checkbox"/> NO	GOVERNMENT MESS UTILIZED? <input type="checkbox"/> YES <input type="checkbox"/> NO
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CERTIFICATE OF HOUSING OFFICER

<input type="checkbox"/> GOVERNMENT QUARTERS WERE NOT AVAILABLE DURING THE PERIOD TEMPORARY LODGING IS CLAIMED.
<input type="checkbox"/> PERMANENT HOUSING WAS OCCUPIED/GOVERNMENT QUARTERS WERE ASSIGNED (Date) _____
<input type="checkbox"/> PERMANENT HOUSING WAS VACATED (Date) _____
<input type="checkbox"/> GOVERNMENT QUARTERS WERE TERMINATED (Date) _____

SIGNATURE _____ Click to sign	DATE _____
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CERTIFICATE OF TRANSPORTATION OFFICER

<input type="checkbox"/> HOUSEHOLD GOODS AVAILABLE FOR DELIVERY ON (Date) _____
<input type="checkbox"/> HOUSEHOLD GOODS WERE DELIVERED AND ACCEPTED ON (Date) _____
<input type="checkbox"/> HOUSEHOLD GOODS COULD NOT BE DELIVERED TO PERMANENT QUARTERS FOR REASONS BEYOND THE CONTROL OF THE MEMBER
<input type="checkbox"/> HOUSEHOLD GOODS WERE RELEASED FOR SHIPMENT ON (Date) _____

SIGNATURE _____ Click to sign	DATE _____
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CERTIFICATE OF BILLETING OFFICER

<input type="checkbox"/> TEMPORARY QUARTERS ARE NOT AVAILABLE	<input type="checkbox"/> TEMPORARY QUARTERS ARE AVAILABLE
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SIGNATURE _____ Click to sign	DATE _____
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REMARKS

<LETTERHEAD>

MEMORANDUM FOR 31 CES/CEIH

FROM: <Your name>

SUBJECT: Additional TLA Request due to Unavailability

1. Request authorization for additional TLA for __ days (from ____ to _____). I arrived at Aviano AB on _____ and have not been able to find available housing. I have aggressively searched. After day 20 of house hunting, I began working with Housing Counselors to secure housing. My Quarters Visited Form is attached and identifies the 12+ homes visited and the various justified reasons for declining each house.

2. Please contact me with any questions or concerns at _____.

<your signature block>

1 Atch
Quarters Visited Form

1st Ind., (squadron commander)

Concur.

<Commander's signature block>

<LETTERHEAD>

MEMORANDUM FOR 31 CES/CEIH

FROM: <Your name>

SUBJECT: Additional TLA Request due to Circumstances beyond my Control

1. Request authorization for TLA extension for __ days (from____ to _____). I arrived at Aviano AB on _____ and have not been able to find available housing due to circumstances beyond my control.

2. <Describe in detail circumstances beyond your control. Examples included:

- Temporary furnishings are not available
- Acts of God, i.e. fire/flood/earthquake, which made the house uninhabitable
- Unexpected withdrawal of your selected house from the market by the landlord
- Member or dependents are/were hospitalized resulting in curtailment of housing search
- Member's mission essential duties curtailed housing search
- Suitable/adequate houses are unavailable even with Housing Office assistance>

3. <Include any other documents you feel necessary to support your request>

4. Attached is my Quarters Visited Form.

5. Please contact me with any questions or concerns at _____.

<your signature block>

1 Atch
Quarters Visited Form

1st Ind., (squadron commander)

Concur.

<Commander's signature block>