



**APPLICATION FOR STORAGE OF HOUSEHOLD EFFECTS**

**NAME:** \_\_\_\_\_

**ADDRESS:** \_\_\_\_\_  
 \_\_\_\_\_

**REASON STORAGE SOUGHT (please tick):**

RELINQUISHING RENTAL ACCOMMODATION

OTHER (please detail): \_\_\_\_\_  
 \_\_\_\_\_

**NOTE:** It is recommended that you take out household/personal effects insurance whilst your belongings are in storage, neither the AAD nor GRACE cover them. Please talk to your GRACE Coordinator for further information.

**SIGNATURE:** \_\_\_\_\_ **DATE:** \_\_\_\_\_

**OFFICE USE**

Station: \_\_\_\_\_ Departure Voyage / Flight No.: \_\_\_\_\_

Summer  Winter Round Trip

**Application meets requirements:** Signature: \_\_\_\_\_  
 Personnel Services Supervisor

Date: \_\_\_\_\_

**Where application does not meet normal requirements:**

I recommend this application be APPROVED/NOT APPROVED for the following reason(s):

\_\_\_\_\_  
 \_\_\_\_\_

**This recommendation is APPROVED/NOT APPROVED**

Delegate Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Expeditioner Notified: YES NO Date: \_\_\_\_\_