

REQUEST FOR PROXY TAKEOVER OF SERVICES FAMILY ACCOMMODATION

Part 1

From:

Current Address:

Current Telephone No:

SFA Address Allocated At Gibraltar:

In accordance with your Letter FHS/23 dated I am taking the option of using a proxy from my gaining unit who will be responsible for the move-in into my SFA. The following has been signed accordingly for your action as necessary.

Part 2

I (Number, Rank & Name)

Request that:

Proxy's Rank & Name
Department Name & Address.....
Telephone Number.....

Be accepted as my Service proxy appointed by me to take over my SFA, taking over responsibility for the requirements of the move-in.

Part 3

I (Number, Rank & Name)

Accept the proxy responsibilities as laid down in FH Gib Form FH/2 on behalf of:

Licensee's Rank & Name

Signed..... Date.....