

SAMPLE APPLICATION FORMAT FOR  
SUBMARINE SUPPORT INCENTIVE PAY (SSIP)

FOR OFFICIAL USE ONLY (WHEN FILLED IN)

Date

From: (Eligible Officer; Rank Name USN, DESIG)  
To: Commander, Navy Personnel Command (PERS-42)  
Via: (Chain of Command)

Subj: REQUEST FOR SUBMARINE SUPPORT INCENTIVE PAY

Ref: (a) NAVADMIN 293/10  
(b) 37 United States Code §323

1. I have read and understand the provisions of reference (a), including all provisions relating to termination of payments to be made under this agreement and the circumstances under which recoupment by the Government of sums paid may be required, to which I agree. I hereby apply for the special pay authorized by reference (b).

2. Contingent upon acceptance of my application for Submarine Support Incentive Pay, I agree not to tender a resignation for a period of (Note 1) year(s) beyond my existing service obligation, or for a period of (Note 2) year(s) beyond the date of acceptance of this request, whichever is later. I understand that, upon acceptance, this application is binding, and that thereupon I shall be eligible to receive (Note 3) per year of this agreement in Submarine Support Incentive Pay as described in reference (a).

3. I understand that payment will be made in (Note 4) equal installments.

(Signature)

Note 1: Enter two or three.

Note 2: Must be same number as entered from Note 1.

Note 3: SSIP rates are bound to the length of the agreement requested. SSIP rates are as follows:

- \$20,000 per year for a 2-year agreement.

- \$25,000 per year for a 3-year agreement.

Note 4: Must be the same number as entered from Note 1.