



Authorization for Release of Information Records of Arrests and Prosecutions

Applicant Name: _____

Social Security Number: _____

Date of Birth: _____ Sex: Male Female

Race: Black White Asian Native American Island Pacific Other: _____

State(s) that you have resided in for the last ten (10) years: _____

This person has applied for housing assistance under a program of the U. S. Department of Housing and Urban Development (HUD). HUD requires the housing owner to verify all information that is used in determining this person's eligibility or level of benefits. We ask your cooperation in providing this information and returning it to the person listed at the top of this page. Your prompt return of this information will assure timely processing of the application for assistance. Enclosed is a self-addressed stamped envelope for this purpose. The applicant/tenant has consented to this release of information as shown below.

Applicant/Tenant Statement of Release:

I understand that my eligibility for housing assistance may be affected by the nature and extent of any criminal history that I may have. I have disclosed my criminal history (if any) on my application for housing assistance, and hereby authorize Jefferson Metropolitan Housing Authority to request verification from local, State, or Federal law enforcement agencies and court records.

Signature

Date

Result of Search:

_____ No record has been found

_____ Copy of record is attached

Signature of Police/Court/or Authorized Official and Title

Date

* Have you offered a unit? () Yes () No

* Landlord Rental History completed? () Yes () No

* All is correct on PHA-Web waiting list? () Yes () No (BC, SS & Photo ID)

* Current address is correct? () Yes () No

Property Manager requesting background check: _____

AMP: _____

Date: _____