

TENANT RELEASE AND CONSENT FORM

I/We _____, the undersigned hereby authorize all persons or companies in the categories listed below to release without liability, information regarding employment, income, and/or assets to _____

(Owner or agent)

for purposes of verifying information on my/our apartment rental application.

INFORMATION COVERED

I/We understand that previous or current information regarding me/us may be needed. Verifications and inquiries that may be requested include, but are limited to: personal identity; employment, income, and assets; medical or child care allowances. I/We understand that this authorization cannot be used to obtain any information about me/us that is not pertinent to my eligibility for and continued participation as a Qualified Tenant.

GROUPS OR INDIVIDUALS THAT MAY BE ASKED

The groups or individuals that may be asked to release the above information include, but are not limited to:

Past and Present Employers
Previous Landlords (including
Public Housing Agencies)
Support and Alimony Providers

Welfare Agencies
State Unemployment Agencies
Social Security Administration
Medical and Child Care Providers

Veterans Administration
Retirement Systems
Banks and other
Financial Institutions

CONDITIONS

I/We agree that a photocopy of this authorization may be used for the purposes stated above. The original of this authorization is on file and will stay in effect for twelve months from the date signed. I/We understand I/We have a right to review this file and correct any information that is incorrect.

SIGNATURES

Applicant/Resident

(Print Name)

Date

Co-Applicant/Resident

(Print Name)

Date

Adult Household Member

(Print Name)

Date

Adult Household Member

(Print Name)

Date

NOTE: THIS GENERAL CONSENT MAY NOT BE USED TO REQUEST A COPY OF A TAX RETURN. IF A COPY OF A TAX RETURN IS NEEDED, IRS FORM 4506, "REQUEST FOR COPY OF TAX FORM" MUST BE PREPARED AND SIGNED SEPARATELY.