

CAIRO HOUSING AUTHORITY
HULETT PARK HOMES
420 South High St.
Cairo, NE 68824
Ph. 308-485-4722

CONSENT TO RELEASE INFORMATION

I hereby give authorization to release any and all information and documentation necessary to determine eligibility and continued eligibility for housing assistance through the Cairo Housing Authority. Information requested includes but may not be limited to:

1. Income: Including employment, pension, regular gifts, Social Security benefits, TANF, Unemployment, Military pay, workman's compensation benefits, alimony, child support, etc.
2. Assets: Including banking and savings accounts of record (including IRA's and CD's), stocks, bonds, financial institutions, homes, mobile homes, items of value worth more than \$5,000 (excluding vehicles)
3. Law Enforcement Agencies: Information including criminal history, pending criminal charges, and civil matters in which I may have been involved in.
4. Utility Companies: Information regarding my performance records as a customer.
5. References: Landlord history or related history that would indicate my ability to abide by a lease and/or live independently.
6. Medical History: Information concerning past medical expenses for use only in determining family's eligibility and rent.
7. Educational Institutions: Information providing proof of attendance, class load, and full-time status.
8. INS: Information regarding citizenship and the family's eligibility to receive benefits.

A photo or facsimile copy of this authorization may be deemed to be the equivalent of the original and may be used as a duplicate original.

I have read the above and do understand and agree to the release of this information.

Signed (Head)

Social Security Number (Head) _____

(Date)

Signed (Spouse)

Social Security Number (Spouse) _____

(Date)

Signed (Other Adult)

Social Security Number (Other Adult) _____

(Date)

We Support Fair and Equal Housing