



AUTHORIZATION FOR RELEASE OF INFORMATION

CONSENT:

I authorize and direct any Federal, State or local agency organization, business or individual to release to SPRING CREEK GYPSUM information or materials needed to complete and verify my application for participation, and/or to maintain my continued assistance under the housing assistance programs. I understand and agree that this authorization or the information obtained with its use may be given to and used by the Department of Housing and Urban Development (HUD) in administering and enforcing program rules and policies.

INFORMATION NEEDED:

I understand that, depending on program policies and requirements, previous or current information regarding me or my household may be needed. Verifications and inquiries that may be requested include but are not limited to:

Identity and Marital Status	Employment, Income & Assets	Residences & Rental
Medical or Child Care Allowances	Credit & Criminal Activity	Activity

I understand that this authorization cannot be used to obtain any information about me that is not pertinent to my eligibility for and continued participation in a housing assistance program.

GROUPS OR INDIVIDUALS THAT MAY BE ASKED:

The group or individuals that may be asked to release the above information (depending on program requirements) include but are not limited to:

Previous Landlords (including Public Housing Agencies)	Past & Present Employers Welfare Agencies	Veterans Administration Retirement Systems
Court & Post Offices	State Unemployment	Bank & Other Financial Institutions
School & Colleges	Utility Companies	Social Security Administration
Law Enforcement Agencies	Support & Alimony Providers	Medical & Child Care Providers
Credit Providers & Credit Bureaus		

COMPUTER MATCHING NOTICE & CONSENT:

I understand and agree that HUD or Spring Creek Gypsum may conduct computer matching programs to verify the information supplied for my application or recertification. If a computer match is done, I understand that I have a right to notification of any adverse information found and a chance to disprove that information. HUD may in the course of its duties exchange such automated information with other Federal, State, or Local agencies, including but not limited to: State Employment Security Agencies; Department of Defense; Office of Personnel Management; the U.S. Postal Service; the Social Security Agency, and State Welfare and food stamps agencies.

CONDITIONS:

I agree that a photocopy of this authorization may be used for the purpose stated above. This authorization will stay in affect if I am a participant in any housing assistance program administered by Spring Creek Gypsum.

Signature

Social Security #

Date

Signature

Social Security #

Date

Signature

Social Security #

Date

Signature

Social Security #

Date

