

TYPE OF CHECK REQUIRED: CRIMINAL ONLY

HEAD OF HOUSHOLD INFORMATION

PRINT NAME HEAD OF HOUSEHOLD _____

SOCIAL SECURITY NUMBER - HEAD OF HOUSEHOLD _____

PERSONAL RELEASE FORM

I, (the undersigned) authorize Davis Community Housing Authority or its assigned agents to obtain my credit report, employment records, education verification, rental history, driving record, and/or criminal history. I understand that this information will only be gathered for the services for which I am applying.

(PLEASE PRINT APPLICANTS INFORMATION CLEARLY)

FULL NAME: _____

Social Security Number: _____

Date of Birth: _____

Place of Birth: _____

Current Street Address: _____

City: _____

State: _____ **Zip Code:** _____

Signature

Date

OFFICE USE ONLY

DATE OF REPORT: _____

RESULTS:

UCJIS: _____

SEX OFFENDER REGISTRY: _____

NAHRO REGIDTRY: _____

HUD: _____

HAPPY REGISTRY: _____

BAD TENANT LISTING: _____

SAVES: _____