

Tenant Release and Consent

I/We _____, The undersigned hereby authorize _____
_____, to release without liability, information regarding my /our
employment, income, and/or assets to _____ for purposes of
verifying information provided as part of my/our apartment rental application.

INFORMATION COVERED

I/We understand that previous or current information regarding me/us may be needed. Verifications and inquires that may be requested include , but are not limited to personal identity; employment, income, and assets; medical or childcare 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 group or individuals that may be asked to release the above information includes, but are not limited to:

Past and Present Employers	Welfare Agencies	Veterans Administration
Previous Landlords	State Unemployment Agency	Retirement Systems
Public Housing Agencies	Social Security Administration	Banks and Others
Support and Alimony Providers	Medical/Child Care Providers	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 on file for one year and one month from the date signed. I/We understand I/We have a right to review this file and correct any information that I/We can prove is incorrect.

SIGNATURES

Head of Household (Print Name) Date

Spouse (Print Name) Date

Adult 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 SEPERATLY.