

**AUTHORIZATION  
Release of Information**

Last Name	First Name	Middle Name	Other Names Used			
If Married – How Long	Maiden Name	Employer	Employer Phone #			
Home Address	City	State	Zip	How Long yrs mths		
If less than 7 years at present address Previous Address	City	State	Zip			
Phone #	Sex M F	Date of Birth			Social Security #	Drivers License #
		MM	DD	YYYY		
*NOTE: Date of birth, sex, and race are being requested only for purposes of identification in obtaining accurate retrieval		Race	State Drivers License was issued in:			

I agree to permit an investigation of my credit, criminal, tenant history, banking and employment for the purposes of resident screening.

\_\_\_\_\_  
Name (please print)

X \_\_\_\_\_  
Signature

\_\_\_\_\_  
Date