

Spartanburg Housing Development
 Post Office Box 2828, 325 South Church Street
 Spartanburg, SC 29304
 Telephone 864-598-6000

**Authorization for Release of Information Pertaining to the
 Approved Resident Selection and Screening Process**

Note: A separate form must be completed by each household member age 17 and over

Applicant / Resident Identifying INFORMATION (Please PRINT):

 First Name Middle Name Last Name Date of Birth

 Maiden Name or Any Other Name Used Social Security Number

 Place of Birth: City & State & Country

Race and Ethnicity and Gender Information:
 _____ White _____ American Indian/Alaskan Native
 _____ Black/African American _____ Asian/Pacific Islander
 _____ Hispanic _____ Male
 _____ Non-Hispanic _____ Female

 Current Street Address

 City, State Zip Code

 Driver's License or Picture I. D. Number State Issued

RELEASE: I understand and agree that as an applicant for residency with the Spartanburg Housing Development, I hereby authorize the release of information pertaining to my previous resident history, credit history, criminal background information, and sexual offender registry. I understand and agree that this information is to be used only for determining my eligibility for rental assistance with the Spartanburg Housing Authority.

 Resident / Applicant Signature Date signed

PENALTIES FOR MISUSING THIS CONSENT: TITLE 18, SECTION 1001 OF THE U. S. Code states that a person is guilty of a felony for knowingly and willingly making false or fraudulent statements to any department of the United States Government. HUD, the PHA and any Owner (or employee of HUD, the PHA or the Owner) may be subject to penalties for unauthorized disclosures or improper uses of information collected based on the consent form. Use of the information collected based on this verification form is restricted to the purposes cited above. Any person who knowingly or willingly requests, obtains or discloses any information under false pretenses concerning an applicant or participant may be subject to a misdemeanor and fined not more than \$5000. Any applicant or participant affected by negligent disclosure of information may bring civil action for damages, and seek other relief, as may be appropriate, against the officer or employee of HUD, the PHA or the Owner responsible for the unauthorized disclosure or improper use. Penalty provisions for misusing the social security number are contained in the Social Security Act at 42 U.S.C. (208)(f)(g) and (h). Violation of these provisions are cited as violations of 42 U.S.C. 408 (f), (g) and (h).

EQUAL HOUSING OPPORTUNITY

FOR AGENCY USE ONLY:

| | | |
|--|-------------------------|-------------------|
| CRIMINAL BACKGROUND CHECK: | ELIGIBLE | INELIGIBLE |
| NATIONAL _____ | _____ | _____ |
| STATE _____ | _____ | _____ |
| LOCAL _____ | _____ | _____ |
| ACTION: INITIAL RESEARCH _____ | ADDITION TO LEASE _____ | |
| DATE RECEIVED ON _____ | | |
| SHA REVIEWER INITIALS _____ | | |
| REPORT DESTROYED ON _____ | BY _____ | |