

Authorization to Release Information - City of Seattle Affordable Housing Programs

Property Name:	U	nit #:
Household Name:	Household Member # (See	e REA):
This section is to be signed by each applicant/resident or household member who is at least 18 years old, or an emancipated minor.		
As a condition of participating in an affordable housing program, I understand the property owner is required to certify each resident's eligibility initially and annually for such program. Consequently, I understand it is necessary for me to give authorization for specific income and asset information to be provided on one or more of the following forms: > Employment Verification > Social Security/Supplemental Security Income Benefits Verification > Public Assistance Verification > Public Assistance Verification > Unemployment Benefits Verification > Military Pay Verification > Pension Verification > Pension Verification > Deposit Verification Request > Student Status Verification > Child Support verification (to be used if property management has their own form) This Authorization is limited to the forms listed above and expires 180 days after the date of my signature below unless revoked in writing by me earlier. By my signature below, I authorize the representative individuals to disclose my specific income and asset information as requested on the forms above. No other information may be released without my express written authorization. Notice to applicant/resident: Do not sign this document unless the authorized management agent's signature appears at the bottom of this page. X		
Applicant/Resident Signature	Print Name	Date
This section is to be signed by the compliance staff	who will be interacting with the perso	nal/private file information.
By the signature of its authorized management agent below, and in consideration for execution of this Authorization by the applicant/resident, property representative warrants the following:		
1. Information requested on the above form is required and necessary to complete certification of the applicant/resident's eligibility to reside in the above housing property.		
2. The information requested above will be used for no purpose other than determining such applicant/resident's eligibility; will be maintained as confidential personal information subject to disclosure only as required by proper administrative or judicial process, and will not be otherwise disclosed by the property owner or management; and		
3. The property owner and management have instituted procedures that insure all personally identifiable information provided pursuant to this authorization will be maintained as (a) confidential personal information, (b) separate from that of other residents, and (c) using such physical and other security measures, including security measures for protection of records maintained in electronic or magnetic form, sufficient to protect such information from any unauthorized use, access, or disclosure.		
X Property Representative Signature	rint Name	 Date