



GENERAL RELEASE OF INFORMATION

I consent to allow the Housing Authority of the City of Reno (RHA) or the U.S. Department of Housing and Urban Development (HUD) to request and obtain the information listed below for the purpose of determining my eligibility and level of benefits under HUD's assisted housing programs. RHA may use this release to make inquiries or secure information from any source whatsoever, including a person, business, or organization that has, or may have, any information listed below. I understand that income information received under this consent form cannot be used to deny, reduce, or terminate assistance without first independently verifying what the amount was, whether I actually had access to the funds and when the funds were received. In addition, I must be given an opportunity to contest those determinations. If I participate in the Project-Based or Mod Rehab program, I also authorize RHA and the owner and/or manager of the building in which I reside to share with each other any information needed to verify my continued eligibility and suitability for subsidized housing.

- Information necessary to authenticate preference claims;
Rental history records and references, including but not limited to, information about the ability to pay rent, the ability to live independently, take care of rental property, and get along well with neighbors;
Serious or repeated violation(s) of the signed lease agreement and damages caused to a unit;
Services provided by individuals or agencies which are relevant to the ability to pay rent and take care of rental property;
Non-residential references from individuals with whom a professional relationship has been established, and references from neighbors, community and relatives;
References from employers, including wage and salary information;
Criminal history;
Information on payment history and balances owed to utility companies including but not limited to NV Energy;
Medical, prescription and insurance expenses;
(HUD only) U.S. Social Security Administration and U.S. Internal Revenue Service;
Income and asset information from any source, including State Wage Information Collection Agencies, for all family members;
Immigration status, citizenship status, and legal identity verification;
Child care;
School registration for minor children and for family members over the age of 18 where required to establish program eligibility;
Registration in educational or vocational training programs including information about participation/completion of such programs;
Verification of disability or handicap, if necessary for program eligibility (does not include details of actual disability or handicap);
Verification of need for reasonable accommodation, if requested;
Verification with U.S. Postal Service;
Credit reports and/or tenant screening reports from private contractors;
Termination for violation of family obligations and reasons for the termination;
Involvement in fraud, bribery or other corrupt or criminal acts;
Drug trafficking by household members;
Balance of money owed to RHA;
Outstanding debts to other housing agencies.

Head of Household (printed name) Signature Date
Co-Head, Spouse, Partner, or Other Adult (printed name) Signature Date
Other Adult (printed name) Signature Date
Other Adult (printed name) Signature Date

Authority: This release of information is in lieu of the HUD-9886 Authorization for the Release of Information/Privacy Act Notice.



**This consent form remains effective until the earliest of (i) the rendering of a final adverse decision for an assistance applicant; (ii) the cessation of a participant's eligibility for assistance from HUD and RHA; or (iii) the express revocation by the assistance applicant or recipient (or applicable family member) of the authorization, in a written notification to HUD or RHA.**

**Who must sign the consent form:**

Each member of your household who is 18 years of age or older must sign the consent form. Additional signatures must be obtained from new adult members joining the household or whenever members of the household become 18 years of age.

**Failure to sign consent form:**

Your failure to sign the consent form may result in the denial of eligibility or termination of assisted housing benefits, or both. Denial of eligibility or termination of benefits is subject to RHA's grievance and Housing Choice Voucher informal hearing procedures.

**Revocation of consent:**

If you revoke consent, RHA will be unable to verify your information although the data matches between HUD and other agencies will continue to automatically occur in the Enterprise Income Verification (EIV) System if the family is not terminated from the program.

**Privacy Act Notice:**

Authority: The Department of Housing and Urban Development (HUD) is authorized to collect this information by the U.S. Housing Act of 1937 (42 U.S.C. 1437 et. seq.), Title VI of the Civil Rights Act of 1964 (42 U.S.C. 2000d), and by the Fair Housing Act (42 U.S.C. 3601-19). The Housing and Community Development Act of 1987 (42 U.S.C. 3543) requires applicants and participants to submit the Social Security Number of each household member who is six years old or older. Purpose: Your income and other information are being collected by HUD to determine your eligibility, the appropriate bedroom size, and the amount your family will pay toward rent and utilities. Other Uses: HUD uses your family income and other information to assist in managing and monitoring HUD-assisted housing programs, to protect the Government's financial interest, and to verify the accuracy of the information you provide. This information may be released to appropriate Federal, State, and local agencies, when relevant, and to civil, criminal, or regulatory investigators and prosecutors. However, the information will not be otherwise disclosed or released outside of HUD, except as permitted or required by law. Penalty: You must provide all of the information requested by the HA, including all Social Security Numbers you, and all other household members age six years and older, have and use. Failure to provide any of the requested information may result in a delay or rejection of your eligibility.

**Penalties for Misusing this Consent:**

HUD, RHA and any owner (or any employee of HUD, RHA 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 form is restricted to the purpose cited on the form. Any person, who knowingly or willfully 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 \$5,000. 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, RHA or the owner responsible for the unauthorized disclosure or improper use.

**OMB Burden Statement:**

Collection of information on income and assets is required for program eligibility determination purposes. The submission of this consent form is necessary so that RHA can carry out the requirements of Section 904 of the Stewart B. McKinney Homeless Assistance Amendments Act of 1988, as amended by Section 903 of the Housing and Community Development Act of 1992 and Section 3003 of the Omnibus Budget Reconciliation Act of 1993 (42 U.S.C. 3544) and Section 104 of HOTMA to ensure that HUD and RHA can verify eligibility and income information for applicants and participants. This information collection is protected from disclosure by the Privacy Act.