

MOUNTAIN COUNTRY HOMES OF HOPE, INC. AUTHORIZATION TO RELEASE INFORMATION

This information is to be used by Mountain Country Homes of Hope in determining whether you qualify as a prospective homeowner under the parameters of the program. It will not be disclosed outside the agency except as required and permitted by law. You do not have to provide this information, but if you do not, your application for approval as a prospective applicant may be delayed or rejected. The undersigned waives any requirements imposed by Federal or State law that limits the use of this information by Mountain Country Homes of Hope, Inc.

I/We hereby authorize Mountain Country Homes of Hope to verify my/our past and present employment earnings records, bank accounts, and/or character references pertaining to my/our application for housing. I/We further authorize Mountain Country Homes of Hope to order a consumer credit report and verify other credit information, including past and present mortgage and/or landlord references. It is understood that a copy of this form will also serve as authorization. The information that Mountain Country Homes of Hope obtains is only to be used in the processing of my/our application for a home.

Applicant #1:

Printed Name: _____ Date: _____

Applicant=s
Signature: _____

Social Security #: _____ Date of
Birth: _____

Applicant #2:

Printed
Name: _____ Date: _____

Applicant=s
Signature: _____

Social Security #: _____ Date of
Birth: _____

Request: You are authorized to release credit and employment information to Mountain Country Homes of Hope for the purpose of determining need, credit, employment history and/or character references pertaining to my/our application for housing.

Part I- Verification of Present Employment- **To Be Completed By Employer**

Applicant=s First Date of Employment	Present Position	Probability of continued employment
Current Gross Base Pay (Enter Amount and Check Period)	If Overtime or Bonus is applicable, is it likely to continue?	Amount of last pay increase

Remarks (if employee was off work for any length of time, please indicate time period and reason: _____)

