



NATIONAL CREDIT REPORTING BACKGROUND CHECK RELEASE FORM

HOUSING CHOICE VOUCHER: _____

Applicant's Name _____
Last First M.I

Social Security Number: _____ Date Of Birth _____

Present Address _____
No. Street City State Zip Code

Landlord's Name: _____ Move In Date: _____

Landlord's Address _____
No. Street City State Zip Code

Former Address: _____

Employer's Name: _____

Employer's Address: _____
No. Street City State Zip Code

Date of Hire: _____ Number of Hours Worked Per Week: _____

Gross Salary \$ _____ (Circle One) Weekly/ Bi-Weekly/ Bi-Monthly/ Monthly/ Yearly

If not employed, list your source of income _____

Gross Amount \$ _____ (Circle One) Weekly/ Bi-Weekly/ Bi-Monthly/ Monthly/ Yearly

I hereby authorize the Jersey City Housing Authority, and its designee, National Credit Reporting the right to conduct searches for the purpose of obtaining rental lease information it deems desirable in the processing of my application for public housing (if a resident, to comply with continued occupancy requirements). Information to be obtained includes but is not limited to criminal background checks, credit reports and rental history.

Applicant's Signature Date

Below for Office Use Only

JCHA Processor: Applicant Selection _____
Initial/Date Processed

- Check Request Category: Emergency Transfer Wait List Applicant Zero Income Resident Lease Addition New Head of Household Approved Split Live-In Aide Medical/Administrative Transfer If Relocation, to which AMP? _____ (Receiving AMP will be charged)

_____ Pass _____ Fail

Director of HCV, Patricia Ramirez / Designee Date