



BERKSHIRE HOUSING

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Authorization for the Release of Information

Massachusetts Executive Office of Housing and Livable Communities (EOHLC)

Purpose:

EOHLC and the U.S. Department of Housing and Urban Development ("HUD"), and administering agencies, including Berkshire Housing, may use information, data, documents and other materials ("information") obtained with this Authorization for any of the following purposes:

- To verify salary, wages and assets
- To request certain tax return information from the U.S. Social Security Administration and IRS
- To administer and enforce program rules and policies
- To determine initial and continuing eligibility for programs
- To determine the appropriate bedroom size
- To determine the amount your family will pay toward rent and utilities
- To analyze utility consumption data for purposes related to energy conservation
- To comply with HUD and other laws, rules and regulations
- To make referrals to other EOHLC funded programs or MTW initiatives for recruitment and outreach purposes (there is no obligation to participate in these programs)
- To inform external evaluations or academic research conducting reviews of EOHLC programs and MTW initiatives with the goal of analyzing program usage, or increasing program efficiency and efficacy
- For certain routine uses, such as to other government agencies for law enforcement
- To federal agencies for employment suitability
- To housing authorities for the purpose of determining housing assistance

HUD, EOHLC, and administering agencies may participate in computer matching programs with these sources in order to verify your eligibility and level of benefits.

Who Must Sign the Consent Form

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

Authorization and Expiration of Authorization:

This Authorization remains effective until the earliest of: 1) the rendering of a final adverse decision for an assistance applicant; 2) the cessation of a participant's eligibility for assistance from HUD, EOHLC, and administering agencies; or 3) the express revocation by the assistance applicant or recipient (or applicable family member) of the authorization, in a written notification to HUD, EOHLC, or the administering agency.

I authorize the release, at all times while this Authorization remains in effect, to EOHLC, HUD, and/or their agents and administering agencies, of any information about me, my family or the leased premises that is pertinent to any of the purposes specified above, including my initial and continuing eligibility for participation in any of EOHLC's rental assistance programs.

Individuals or Organizations That May Release Information:

Any individual, governmental or other organization including the following is hereby authorized to release information at any time while this Authorization remains in effect:

- Banks and Other Financial Institutions
- Courts
- Law Enforcement Agencies
- Credit Bureaus
- Employers (past and present)
- Landlords
- Schools and Colleges
- State Wage Information Collection Agencies (This consent is limited to wages and unemployment compensation received when I have received assisted housing benefits)
- U.S. Internal Revenue Service (HUD only) (This consent is limited to unearned income [i.e., interest and dividends])
- U.S. Social Security Administration (HUD only) (This consent is limited to the wage and self-employment information and payments of retirement income as referenced at Section 6103(l)(7)(A) of the Internal Revenue Code)
- U.S. Department of Veterans Affairs
- The Massachusetts Department of Revenue
- Utility Companies
- Welfare Agencies
- Department of Revenue
- Providers of: Alimony, Child Care, Child Support, Credit, Handicapped Assistance, Medical Care, Pensions/Annuities
- Registry of Motor Vehicles
- INS/SAVE
- Federal, State, Tribal, or local agencies that conduct computer-matching programs

HUD and EOHLC are required to protect the income information they obtain in accordance with the Privacy Act of 1974, 5 U.S.C. 552a. EOHLC is also required to protect the income information it obtains in accordance with any applicable State privacy law. Private owners may not request or receive information authorized by this form.

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 EOHLC's Section 8 informal hearing procedures.

Revocation of Consent:

If you revoke consent, EOHLC and Berkshire Housing 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.

Conditions:

I agree that photocopies of this Authorization may be used for the purposes stated on this Authorization for Release of Information form.

I understand that Information obtained by means of this Authorization will be used exclusively for the purposes stated above, and that the Information will be released to others only as reasonably appropriate to further such purposes, unless otherwise provided by Law. I understand that EOHLC and administering agencies that receive income information under this consent form cannot use it 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.

I understand that, if I do not sign this Authorization, my housing assistance may be denied or terminated.

Printed Name of Head of Household	Signature of Head of Household	Date
Printed Name of Co-Head of Household	Signature of Co-Head of Household	Date
Printed Name of Spouse	Signature of Spouse	Date
Printed Name of Other Adult Tenant	Signature of Other Adult Tenant	Date
Printed Name of Other Adult Tenant	Signature of Other Adult Tenant	Date
Printed Name of Other Adult Tenant	Signature of Other Adult Tenant	Date
Printed Name of Other Adult Tenant	Signature of Other Adult Tenant	Date
Printed Name of Other Adult Tenant	Signature of Other Adult Tenant	Date

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).

Penalties for Misusing this Consent: HUD, EOHLC, and any administering agency (or any employee of HUD, EOHLC, or administering agency) 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 Release Form is restricted to the purposes cited on this Release 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, EOHLC, or administering agency responsible for the unauthorized disclosure or improper use.