



**AUTHORIZATION FOR RELEASE OF CRIMINAL RECORD,
CREDIT REPORTS, AND LANDLORD REFERENCE
INFORMATION**

I, _____, do hereby authorize the Allegheny County Housing Authority to access\obtain my personal information from any person, agency or service, regarding my background which may include: 1.) criminal background check, 2.) credit reports, 3.) landlord reference check.

I understand that this information will be used to determine my eligibility for public housing. I understand that signing this authorization in no way guarantees my eligibility for public housing.

My full name is :

Any alias names used:

Date of birth:

Any alias date of birth:

Social Security number:

Any alias social security number:

Address, city, state, and zip code:

The information provided is true and correct to the best of my knowledge; information, and belief. I understand that any false statement made, therein, are subject to the penalties of 18 PA, C.S.S. 4904 relating to unsworn falsification to authorities. I understand that I may be required to provide verification of any information requested regarding a criminal history.

Signed: _____

Printed: _____

Date: _____

**ALL ADULTS 18 AND OVER MUST SIGN AN
AUTHORIZATION FORM
ONE FORM PER ADULT**

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YOU'LL BE GLAD TO CALL IT HOME.