

HUTCHINSON HOUSING AND REDEVELOPMENT AUTHORITY

133 Third Avenue SW, Hutchinson, MN 55350

Telephone (320) 587-2168, FAX (320) 587-3748, TDD/TYY 1-800-545-1833, Ext. 709

Date: _____

The following named individual has made application with this agency for Public Housing Purposes:

Please Print

Last Name of Applicant: _____

First Name: _____

Middle Name: _____

Maiden, Alias or Former: _____

Date of Birth: _____ Sex: Male or Female

Social Security Number: _____

I authorize the Minnesota Bureau of Criminal Apprehension to disclose all criminal history record information to Hutchinson HRA for the purpose of determining rental eligibility with this agency.

The expiration of this authorization shall be for a period no longer than one year from the date of my signature.

Signature of Applicant

Date

Notary:

