

To: _____

RE: _____

Name _____

Phone or Fax#: _____

Phone Number _____

FROM: **Oliver Management Services, Inc.**
5713 Grand Ave Suite B
Duluth, MN 55807
Fax: (218) 624-2235

Thank you for your prompt response. All information is confidential. Please contact **Barb** at **(218) 628-0311** if you have any questions.

PERMISSION FOR RELEASE OF INFORMATION

You do not have to sign this form if either the requesting organization or the organization supplying this information is left blank. Release: I hereby authorize the release of requested information. Information obtained under this consent is limited to information that is no older than 5 years. There are circumstances, which would require the owner to verify information that is older than years old, which would be authorized by me on a separate consent attached to a copy of this consent.

Signature _____

Date _____

THIS SECTION TO BE COMPLETED BY APPLICANT'S PERSONAL REFERENCE

Are you a relative or friend of the above named person(s)?

Yes

No

If yes please describe relationship: _____

How long have you known the above named person(s)? _____

How do you know the above named person(s)? _____

If you were a landlord, would you rent to the above named person(s)?

YES

NO

Please explain why. _____

Please describe the above named person(s) in three words _____

Do you know of any reasons that could prevent the above named person(s) from receiving housing from our company? _____

Is there anything we haven't asked that you would like to share with Oliver Management Services, Inc. on the above named person(s)? _____

Signature _____

Date: _____

Print your name _____

Tel #: _____

Title _____

Address _____

PENALTIES FOR MISUSING THIS CONSENT:

TITLE 18, Section 1001 of the U.S. Code states that a person is guilty of a felony for knowingly and willingly making false or fraudulent statements to any department of the United States Government. HUD, the PHA and any owner (or any employee of HUD the PHA or the owner) 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 verification form is restricted to the purposes cited above. 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 that \$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, the PHA or the owner responsible for the unauthorized disclosure or improper use.

Penalty provisions for misusing the social security number are contained in the Social Security Act at 42 U.S.C. 208(f), (g) and (h). Violation of these provisions are cited as violations of 42 U.S.C. 408(f), (g) and (h)