

1900 SE. 4<sup>th</sup> St., Gainesville, FL 32641 Telephone (352) 872-5500 ~ Fax (352) 872-5501 www.gainesvillehousingauthority.org

## **EXECUTIVE DIRECTOR**PAMELA E. DAVIS

## AUTHORIZATION TO OBTAIN CRIMINAL BACKGROUND RECORDS

I/We hereby consent to and authorize the Gainesville Housing Authority ("the Authority") to obtain any and all records concerning my/our criminal background, including but not limited to NCIC records, Florida Department of Law Enforcement records of and in any other State(s) in which I have lived, and the records of any State(s) sex offender registration, including the Florida Section Predator program.

This consent and authorization shall terminate upon termination of my/our tenancy under Public Housing or Section 8 Assistance by the Authority.

I/We consent to and authorize any law enforcement agency to release to the Authority my/our criminal background records, including any records of my/our arrest or conviction of any criminal offense under laws of any State in the Continental U.S or of any country.

Print Name of Head of Household	Date	Signature	
Print Name of Other Adult	Date	Signature	
Print Name of Other Adult	Date	Signature	
THIS SECTION FOR GHA STAFF (			
Reviewed on this date	>		
Disposed on this date			
Action Needed			
Other notes			
Signature of GHA Staff		Date	

