

Summit Twin Oaks Realty Inc.
P.O. Box 12
Barberton, OH 44203
Office Telephone 330-848-2989 FAX 330-848-3643

Authorization For Release of Information

Purpose: The management of Summit Twin Oaks Realty Inc. may use this authorization and the information obtained with it to administer and enforce rules and policies related to the rental of property owned and/or managed by the above named organization.

Authorization: I authorize the above named organization to obtain information about me or my family that is pertinent to the rental of property owned and/or managed by the organization.

Information Covered-Inquiries may be made about: Child Care expenses, credit history, criminal activity, family composition, employment/income/pensions/assets, federal/state/tribal/local benefits, handicapped assistance expenses, identity and marital status, medical expenses, social security numbers, and residences and rental history.

Individual/Organizations that may release information: Any individual or organization including any governmental organization may be asked to release information. For example, information may be requested from: Banks and other financial institutions, courts, law enforcement agencies, credit bureaus, employers, present and past, landlords, schools and colleges, U. S. Social Security Administration, U. S. Dept of Veterans Affairs, Utility Companies, welfare agencies, Providers of: Alimony, child care, child support, credit, handicapped assistance, medical care and pensions/annuities.

Computer matching notice and consent: I agree that the above named organization may conduct computer matching programs with other government agencies including Federal, State, Tribal or local agencies. The government agencies include: U. S. Office of Personnel Management; U. S. Social Security Administration; U. S. Dept. of Defense; U. S. Postal Service; State Employment Security Agencies; and State Welfare and Food Stamp Agencies. The match will be used to verify information supplied by the family.

Conditions: I agree that photocopies of this authorization may be used for the purposes stated above. If I do not sign this authorization, I understand I may be denied occupancy of rental property owned and/or managed by Summit Twin Oaks realty Inc.

Signature Head of Household	Date
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Signature of Spouse/Adult Member	Date
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Signature of Adult Member	Date
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