



GRANT RECIPIENT'S CONSENT TO RELEASE OF INFORMATION

I, _____ understand and acknowledge that _____ (the "Agency"), in exchange for receiving certain funds from the Missouri Housing Development Commission ("MHDC"), is required to share certain un-identifying information about me with MHDC in order to ensure the Agency's compliance with all rules and requirements associated with the funds from MHDC.

I have been informed that the Agency will not release any information about me, my children, or my abuser to any group or individual unless a written release of information is signed by me. I understand that I may revoke a release of information at any time.

The funding received by the Agency and administered by MHDC may actually be from other state and federal agencies, such as Department of Social Services (collectively the "Auditors"). Together with MHDC, the Auditors are entitled to examine records in performing audit and review functions. In these cases, MHDC and the Auditors may see the client information sheet located in my file. I understand that neither MHDC nor the Auditors will leave the premises with any identifying information about me, and will not disclose any identifying information to any third party.

By my signature below, I hereby authorize the Agency to share un-identifying information with MHDC and its Auditors for the limited purposes of proving that I qualify to receive the assistance administered by MHDC and ensuring that the Agency is in compliance with the rules and requirements associated with the funds from MHDC.

Applicant's Signature (initials): _____

Printed Unique Identifier: _____

Date: _____

Among the stated goals of programs administered by MHDC is the provision of safe, decent and sanitary housing. In order to assist MHDC in furthering this goal, please indicate which of the following statements below is most accurate as it pertains to your current housing:

- I believe my current housing, for which I am seeking MHDC assistance, **IS** safe, decent and sanitary.
- I believe my current housing, for which I am seeking MHDC assistance **IS NOT** safe, decent and sanitary.

NOTE – If, at any time while you are receiving assistance through programs administered by MHDC you believe your current housing ceases to be safe, decent and sanitary, please report this to the Agency; and, the Agency will assist you in locating housing that is safe, decent and sanitary.