



**GARFIELD COUNTY HOUSING AUTHORITY**  
**1430 RAILROAD AVENUE, UNIT F**  
**RIFLE, CO 81650**  
**(970) 625-3589 or (888) 627-3589**  
**Fax (970) 625-0859 \* TTY (800) 659-2656**

**Authorization for Release of Information**

I authorize the Garfield County Housing Authority to contact or communicate with any and all agencies including, but not limited to: Landlords (past, present and/or prospective) employers, law enforcement, Departments of Human Resources, Adult and Family Services and State Employment Divisions, Family Support Registry or any other agencies to request any documentation deemed necessary to determine my eligibility or continued participation in the Section 8 Housing Choice Voucher Program.

I authorize any agency contacted by the Garfield County Housing Authority, to cooperate fully and divulge all information requested.

This authorization expires fifteen months after the date signed below.

Signatures:

\_\_\_\_\_

Print name

\_\_\_\_\_

Signature

\_\_\_\_\_

Date

XXX-XX-\_\_\_\_\_

last four of Social Security Number



**Warning: Section 1001 of Title 18 of the United States Code, states that a person who knowingly and willingly makes false or fraudulent statements to any department or agency of the United States is guilty of a felony.**

