Housing Authority

SCREENING COVER LETTER

 Date:

 RE: Name:

 Address:

Dear Sir/Madam:

Our tenant selection policy obliges us to verify certain information about all members of families applying for admission to our developments. To comply with this requirement, we ask your cooperation in supplying the information on the history of the family listed above. This information will be used only in determining whether the family can be accepted for admission. You will note that the family has authorized you to provide this information to us.

Your prompt return of this letter will be appreciated. A self-addressed return envelope is enclosed. If you have any questions, please call \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_.
 (phone number)

Sincerely yours,

Signature Date

Title

# TENANT/APPLICANT RELEASE

I, , hereby authorize the release of the requested information.

Signature Date