

**EAST RIVER HOUSING CORPORATION**

**CRIMINAL LITIGATION REPORT AUTHORIZATION**

(Application for Special Privileges)

I understand that, in connection with my application for special privileges as a resident at the housing development of **EAST RIVER HOUSING CORPORATION** (the "Corporation") in apartment \_\_\_\_\_ located at \_\_\_\_\_ New York, New York 10002, the Corporation may and intends to request a consumer report (a "Report"), which may include information consistent with federal and state law regarding my criminal conviction history. Upon my request, the Corporation will inform me as to whether or not a consumer Report was requested and, if such Report was requested, of the name and address of the consumer reporting agency that furnished the Report.

To verify my identity for purposes of the background investigation for preparing the Report, I voluntarily provide my date of birth, social security number and other names by which I have been known, and fully understand that age is not a consideration of approval of my Application.

I authorize the Corporation to obtain the Report and I authorize and direct the consumer reporting agency selected by the Corporation to furnish the Report to the Corporation.

\_\_\_\_\_  
PRINT NAME (APPLICANT)

\_\_\_\_\_  
DATE

\_\_\_\_\_  
SIGNATURE

\_\_\_\_\_  
ADDRESS

\_\_\_\_\_  
APT. NUMBER

\_\_\_\_\_  
CITY

\_\_\_\_\_  
STATE

\_\_\_\_\_  
ZIP CODE

\_\_\_\_\_  
SOCIAL SECURITY NUMBER

\_\_\_\_\_  
OTHER NAMES BY WHICH KNOWN

\_\_\_\_\_  
DATE OF BIRTH

( ) \_\_\_\_\_  
TELEPHONE NUMBER (Home)

( ) \_\_\_\_\_  
TELEPHONE NUMBER (Business)

If you have lived at the above address for fewer than five (5) years, please list previous address(es) below. We need your residence history for the last five years.

\_\_\_\_\_  
ADDRESS #2

\_\_\_\_\_  
APT. NUMBER

\_\_\_\_\_  
CITY

\_\_\_\_\_  
STATE

\_\_\_\_\_  
ZIP CODE

\_\_\_\_\_  
ADDRESS #3

\_\_\_\_\_  
APT. NUMBER

\_\_\_\_\_  
CITY

\_\_\_\_\_  
STATE

\_\_\_\_\_  
ZIP CODE