MEMBER RELEASE AND CONSENT

I/We		the und	dersigne	d hereby aut	horize <i>Cahiague</i>
Co-operative Homes Inc. to employment, income, assets verifying information as part	release or s, rental hi	obtain without liab story to agencies no	ility, info oted belo	rmation reg	arding my/our
I/We understand that previous Verifications and inquires the identity, employment, incomplete the contract of	ous or curr at may be	ent information reg	arding m but are r	3.5	
GROUPS OR INDIVIDUALS T	HAT MAY	BE ASKED:			
The group or individuals that to:	t may be a	sked to release info	rmation	includes, bu	t are not limited
Past and present employers		Welfare Agencies		Previous Landlords	
Banks and others		Family Responsibility		Credit Agencies	
CONDITIONS:					4
I/We agree that a photocopy The original of this authoriza a right to review this file and	ition is on	file and will stay on	file with	the co-op o	ffice. I/We have
SIGNATURES:					
Signature	Print			Date	
Signature	Print			Date	
For the Co-op	Print		-	Date	