

ACKNOWLEDGEMENT AND AUTHORIZATION TO RELEASE INFORMATION

I/We are hereby applying to purchase a Below Market Rate (BMR) home through the City of Sunnyvale BMR Program and/or for a City of Sunnyvale First Time Home Buyer Loan. By submitting **my/our** application, **I/we** agree that the City of Sunnyvale may verify information contained in **my/our** application and in any other documents required in connection with the purchase, either before or after the transaction has closed, in order to verify **my/our** eligibility for the program, whether to determine **my/our** eligibility, or to complete the processing, approval and underwriting of **my/our** purchase of a BMR home and/or a First-Time Home Buyer Loan.

I/We authorize you to provide to the City of Sunnyvale any and all information and documentation that the City requests and further authorize the City of Sunnyvale to provide any such information and documentation to its designated employees. Such information includes, but is not limited to the following types of information for all members of **my/our** household:

- current place of employment and employment history;
- verification of all sources of income and compensation, including self-employment or business income, gifts, pensions, alimony, child support, regular gifts or support, or public benefits; and
- verification of assets and the value of such assets including real property, checking, savings, investment, and brokerage accounts; and
- mortgage or consumer loan status and payment history, credit history, credit card records;
- Driver's License and automobile registration records or other records of the Department of Motor Vehicles; and
- copies of federal and state income taxes, and other tax filings and records of the IRS, Franchise Tax Board, or any other state or local taxing entity; and
- Social Security statements or benefits; and
- unemployment or disability benefits statements.

Therefore, **I/we** authorize the release of any of the information described below and any other information related to determining **my/our** household income, assets, places of employment and primary residency, upon request of the Housing Division of the City of Sunnyvale.

Additionally, **I/we** give **my/our** consent to have the City of Sunnyvale verify the full-time student status and disability status, and the primary residence address of each of the undersigned members of **my/our** household, and all state, federal and local tax records filed by any of the undersigned adults and/or any business entities they may own.

I/We understand that this information will be kept confidential and is being requested for the purpose of determining **my/our** eligibility for housing assistance from the City of Sunnyvale, and that ALL household members 18 years or older must sign this consent form.

I/We acknowledge that this form expires 12 months after signed and a copy of this Authorization may be photocopied and accepted as an original.

I/We the undersigned and hereby authorize the City of Sunnyvale to request copies of any and all information about **my/our** income, assets, employment, credit report, etc. for the purpose of verification of information provided on **my/our** application to purchase a BMR home through the City of Sunnyvale BMR Program and/or City of Sunnyvale First Time Home Buyer Loan.

Applicant Signature: _____ Date: _____
Print Full Name: _____ Phone: _____
Social Security #: _____ Date of Birth: _____
CA Driver License or ID #: _____ Expiration Date: _____
Current Address: _____

Co-Applicant #1 Signature: _____ Date: _____
Print Full Name: _____ Phone: _____
Social Security #: _____ Date of Birth: _____
CA Driver License or ID #: _____ Expiration Date: _____
Current Address: _____

Co-Applicant #2 Signature: _____ Date: _____
Print Full Name: _____ Phone: _____
Social Security #: _____ Date of Birth: _____
CA Driver License or ID #: _____ Expiration Date: _____
Current Address: _____

Co-Applicant #3 Signature: _____ Date: _____
Print Full Name: _____ Phone: _____
Social Security #: _____ Date of Birth: _____
CA Driver License or ID #: _____ Expiration Date: _____
Current Address: _____

ATTACH ADDITIONAL PAGES IF NEEDED