**SAMPLE**

**AUTHORIZATION TO RELEASE REQUIRED INFORMATION**

**Non-LMI Units**

As the head of household for the address below, I hereby give permission for the following information to be shared with the Michigan Economic Development Corporation (MEDC), and ultimately the U.S. Department of Housing and Urban Development (HUD). I understand this information is being collected for statistical purposes only. I also understand my name will not be reported to MEDC or HUD.

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Signature of the Head of Household Date

Tenant Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

First Name Last Name

Unit Address: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Street Address Unit/Apt. #

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

City State Zip

# of Persons Living in Unit: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Annual Household Income: $\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

*Total Gross income for all adult household members (age 18 or older)*

Ethnicity of Head of Household is Hispanic or Latino: 🞎 Yes 🞎 No

Gender of Head of Household: 🞎 Male 🞎 Female

|  |  |  |  |
| --- | --- | --- | --- |
| Enter **Race of the Head of Household** from list below:  | #  | Enter **Household Type** from list below:  | #  |
| (11) White (12) Black/African American (13) Asian (14) American Indian/Alaskan Native (15) Native Hawaiian/Pacific Islander(16) American Indian/Alaskan Native & White(17) Asian & White(18) Black/African American & White(19) American Indian/Alaskan Native & Black/African American(20) Other Multi-Racial | 1. Single, Non-elderly2. Elderly3. Single Parents4. Two Parents5. Other |