

## Kentucky Homeownership Protection Center Authorization to Release Information

Authorization is hereby granted to Kentucky Housing Corporation (KHC), the Kentucky Homeownership Protection Center, and \_\_\_\_\_ (Counseling Agency), to obtain a consumer credit report through a credit reporting agency. I understand and agree that KHC and my Counseling Agency intend to use the consumer credit report for the consideration of pre-purchase counseling, foreclosure intervention/loss mitigation options and that all use of my credit report will be in compliance with Paragraph 604 of the Fair Credit Reporting Act (FCRA). I understand and agree that a consumer credit report may be obtained at the beginning of my counseling sessions and at the completion of those sessions.

My signature below authorizes the release of financial information which I have supplied to Counseling Agency for its financial counseling program. Such information includes, but is not limited to, employment history and income; bank, money market, and similar account balance(s); credit history; and copies of income tax returns. Authorization is further granted to the credit reporting agency to use a photo static reproduction of this form if required to obtain any information necessary to complete my consumer credit report.

\_\_\_\_\_  
Borrower Name (print)

\_\_\_\_\_  
Co-Borrower Name (print)

\_\_\_\_\_  
Borrower Signature

\_\_\_\_\_  
Co-Borrower Signature

\_\_\_\_\_  
Borrower Social Security Number

\_\_\_\_\_  
Co-Borrower Social Security Number

\_\_\_\_\_  
Date

\_\_\_\_\_  
Date

\_\_\_\_\_  
Address (print)

\_\_\_\_\_  
City, State, Zip (print)

Counselor/HPC use only:

Will KHC pull credit through HCO? Y or N

If yes, date entered in HCO: \_\_\_\_\_

Did you grant access to KHC? Y or N

Counselor: \_\_\_\_\_

KHC date request rec'd: \_\_\_\_\_

Date Credit pulled: \_\_\_\_\_