

**City of Tampa**  
**Homeowner Hurricane Assistance**  
**HHA**



**AUTHORIZATION TO VERIFY EMPLOYMENT, INCOME, ASSET BALANCES,  
CREDIT HISTORY, & MORTGAGE HISTORY**

Applicant Name: \_\_\_\_\_

**This form must be signed by everyone 18 and older in the household.**

I hereby authorize The City of Tampa, its successors and assigns, to verify my past and present employment earnings records, bank accounts, stock holdings and any other asset balances that are needed to process my housing assistance application. I further authorize The City of Tampa to verify my Mortgage History and verify any other information needed to verify my application information.

It is understood that a photocopy of this form will also serve as authorization.

The information that is obtained is to be used in the processing of my application for housing assistance and for subsequent quality control verification. Information obtained in the verifications above may be used to alter an initial decision to either approve or deny any application based on The City of Tampa's program guidelines.

I hereby acknowledge that I am fully aware that it is a federal crime punishable by fine or imprisonment, or both, to knowingly make any false statements concerning any of the information on my application for housing assistance, as applicable under provisions of Title 18, United States Code, Section 1014.

\_\_\_\_\_  
Applicant's Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Co-Applicant's Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Household Member Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Household Member Signature

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Date

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Household Member Signature

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Date

\_\_\_\_\_  
Household Member Signature

\_\_\_\_\_  
Date