



ORMOND BEACH HOUSING AUTHORITY

Established 1951

100 NEW BRITAIN AVE. ORMOND BEACH, FL 32174
(386) 677-2069 – FAX (386) 677-3545

Client Number: _____

TO:

FAX: 822-5036

RE: BACKGROUND CHECKS

I authorize you to release to the Housing Authority of Ormond Beach, Florida a record of my criminal history, if any, as part of my application for admission to the housing program or employment with the Housing Authority.

Please return to:

ORMOND BEACH HOUSING AUTHORITY
FAX: 677-3545

NAME (PLEASE PRINT)

DATE OF BIRTH

SOCIAL SECURITY NUMBER

ETHNICITY

SEX

SIGNATURE

DATE

