

St. John's Centre

Consent to Disclose Income Verification Information (to be used at time of initial occupancy and every annual review)

1. I/we, _____ consent to the acquisition and release of information verifying my/our income to an authorized representative of St. John's Centre by:

(name of financial institution, organization)

(name of financial institution, organization)

(name of financial institution, organization)

for the sole purpose of determining or verifying my initial or ongoing eligibility for subsidized housing.

2. This Consent is effective from the date of signing for **twelve months**.
3. I/we fully understand the nature and purpose of this consent and have given my/our consent and authorization voluntarily.

Applicant Name (Please Print)

Applicant Signature

Applicant Name (Please Print)

Applicant Signature

Dated on this _____ day of _____, _____.