

Housing Authority of The City of Texas City, TX

817 Second Avenue North
Texas City, Texas 77590

Ph: (409) 945-4011
Fax: (409) 943-4525

CRIMINAL CHECK ACKNOWLEDGMENT

I, the undersigned, have been notified and do understand that the Housing Authority of the City of Texas City, as part of the applicant screening process for assisted housing, is authorized by the Housing Opportunity Program Extension Act of 1996 to order a criminal history report on me according to the Housing Authority's Criminal Screening Policy.

I further understand that:

- Criminal Screening will be run first on my name, sex, race, date of birth and social security number
- I will be afforded an opportunity for an informal hearing if I contest the report and I am rejected for housing assistance based on the report

(Applicant Signature)

Date

HOUSING AUTHORITY OF THE CITY OF TEXAS CITY

817 Avenue North, Texas City, Texas 77590

Phone (409) 945-4011

RE: Verification of Eligibility and Suitability for Section 8 Housing Choice Voucher Program.

The individual listed below has applied for housing with the Housing Authority of the City of Texas City (HACTC). As per federal regulation, HACTC must be aware of any record of criminal history involving applicants seeking residency. Please provide any available information for:

(Please Print)

NAME:		
DOB:	RACE:	SEX:
SS#:	DL#:	
ADDRESS:		
CITY, STATE, ZIP:		

Your assistance in this matter is appreciated. Should you have questions or require additional information, please call our office at 945-4011.

Section 8 Housing Choice Voucher Program Representative

Date

I hereby authorize the Texas City Police Department to release the requested information.

Applicant Signature

Date

H. O. H. Name

(TCPD Use Only)

The Person Named Above:

Does Not Have, Does Have