



76 Stevenson Drive  
Dover, DE 19901  
302-678-1965 *voice*  
302-678-1971 *fax*  
1-800-545-1833, ext. 816 TDD  
[doover.housingauthority@dhade.org](mailto:doover.housingauthority@dhade.org) *email*

**CONSENT FOR RELEASE OF INFORMATION**

NAME :

ADDRESS :

I hereby authorize you to release to the Housing Authority of the City and County of Dover, Delaware, information regarding verification of family composition and family income requested by them. In the event I should vacate the premises prior to full settlement of incurred obligations, my forwarding address is also to be released to the Housing Authority.

**I have read the above and do understand and agree to the release of this information.**

DATE:

SIGNATURE: