

Credit Report Authorization Form

Authorization is hereby granted to Neighborhood Housing Services of New Orleans, Inc. (hereinafter "NHS") to obtain a consumer credit report through a credit reporting agency chosen by NHS. I understand and agree that NHS intends to use the consumer credit report for the purpose of evaluating my financial readiness to buy a home.

My signature below authorizes the release to the credit-reporting agency of financial information which I have supplied to NHS in connection with such evaluation. Authorization is further granted to the credit reporting agency to use a photostatic reproduction of this form if required to obtain any information necessary to complete my consumer credit report. Landlords and past and present mortgage holders are authorized to release information if requested.

I authorize my employers, present and past, to complete Verifications of Employment and to release employment as requested.

My banks and financial institutions are authorized to complete Verifications of Deposit and to provide other information as requested by NHS.

Client's Name (Print)

Client's Name (Print)

Client's Signature

Client's Signature

Social Security Number

Social Security Number

Date

Date