



CONSENT TO RELEASE
NEW YORK CITY HOUSING AUTHORITY (NYCHA) RECORDS
IN CONNECTION WITH A
FREEDOM OF INFORMATION LAW (FOIL) REQUEST

I/we, _____, consent to the release of records as set forth
(print name(s))
on this form:

1. I/we request that NYCHA release records, if any, to the person or entity listed below, who has submitted a FOIL request for NYCHA records:

(name)

(phone)

(address)

(email)

2. The records to be released to the above-named person or entity pertain to:

- Section 8 Public Housing Contracts/ Procurement Employment/ Human Resources

Other: _____

Please specify the records to be released, including tenant name, dates, contract number, voucher number, vendor number, case number, development names and addresses: _____

3. I/we release NYCHA from all claims or causes of action arising out of or related to NYCHA's release of records to the above-named person or entity.

4. I/we acknowledge that I/we have read this consent form and fully understand it.

5. I/we acknowledge that this consent form may not be changed orally.

Signature

Signature

Sworn to before me this
day of _____, 20_____

Notary Public