



YUKON HOUSING CORPORATION
RELEASE OF INFORMATION

This information release/exchange is for the purpose of determining my (household) eligibility for tenancy with the Yukon Housing Corporation, maintaining eligibility and tenancy, assessment of rent, and to assist in identification of support services that may benefit me, including co-ordination of services. Information released/ exchanged may include personal (including personal health, financial, and other) information about my/household circumstances.

Last name	First name	Date of birth YYYY/MM/DD
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I, _____, give permission for Yukon Housing Corporation (YHC) to release/exchange information with:

Agency representative	Contact information
Agency representative	Contact information
Agency representative	Contact information
Agency representative	Contact information

I am aware that I may cancel or amend this consent in writing at any time.

_____	YYYY/MM/DD
Signature	Date

_____	YYYY/MM/DD
Witness	Date

If signing on behalf of the applicant please indicate your legal authority to do so.

Provide supporting documents (i.e. POA of legal authority).

_____	_____
Legal authority	Phone

Personal information contained on this form is collected under the authority of the *Housing Corporation Act* and is managed in accordance with the *Access to Information and Protection of Privacy Act*. Personal information on this form will be used only for the purpose of rent collection. For further information, contact the Yukon Housing Corporation ATIPP Coordinator at 867-667-5712.