

Washoe County
Department of Water Resources
Water and Sanitary Sewer Financial Assistance Program

CREDIT REPORT AUTHORIZATION AND RELEASE

The undersigned Applicant(s) desires to obtain financial assistance through the Washoe County Water and Sanitary Sewer Financial Assistance Program (Program). Pursuant to Loan Program Policies and Procedures, Washoe County shall consider an applicant's financial status and credit history to determine the applicant's eligibility to receive a Program loan. Washoe County acknowledges and understands the sensitive nature of the personal and financial information voluntarily provided to and used by Washoe County and its authorized credit reporting agency participating in the administration of the Program. Washoe County and its authorized agents shall take all measures reasonable and necessary to maintain the confidential nature of this sensitive information and shall only disclose such information to authorized employees and agents necessary to carry out the administration of the Program Loan process.

Upon the execution and notarization of this Credit Report Authorization and Release (Authorization and Release), the undersigned Applicant(s) hereby authorizes Washoe County and the Washoe County Department of Water Resources, its authorized employees and agents to obtain a standard factual data credit report through a credit-reporting agency chosen by Washoe County. My signature below authorizes the release to the credit-reporting agency of my credit history, and authorizes the credit-reporting agency to provide information regarding my employment, savings account, and outstanding accounts (mortgages, auto loans, personal loans, charge cards, credit unions, etc.) to Washoe County for the sole and exclusive purpose of evaluating and determining Program Loan eligibility.

The undersigned applicant(s) hereby further authorizes Washoe County and the credit-reporting agency chosen by Washoe County to use a reproduction of this Authorization and Release, if necessary. Any reproduction of this Authorization and Release made by reliable means (for example, photocopy or facsimile) shall be considered an original and have the same force and effect as that of the original.

The undersigned does hereby release Washoe County and the Department of Water Resources, their officers, directors, employees, servants and agents from any liability or damage which may arise from, be connected with or relate to the furnishing and use of the information provided by the undersigned, including any claims, disputes, demands, actions, damages, losses and causes of action that may be asserted by the undersigned against Washoe County or the Department of Water Resources, their officers, directors, employees, servants and agents.

Borrower's Initials ())
Co-Borrower's Initials ())

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Department of Water Resources
Water and Sanitary Sewer Financial Assistance Program**

CREDIT REPORT AUTHORIZATION AND RELEASE

IN WITNESS WHEREOF, the undersigned duly executes this Authorization and Release on the day and year written below.

Borrower's Name (Print)

Co-Borrower's Name (Print)

Borrower's Signature

Co-Borrower's Signature

Social Security Number

Social Security Number

Date: _____

Date: _____

STATE OF NEVADA)
) ss.
COUNTY OF WASHOE)

On _____, 201_, before me, the undersigned, a Notary Public in and for said State, personally appeared [Borrower_____ and Co-Borrower _____], personally known to me or proved to me on the basis of satisfactory evidence to be the persons who executed the above instrument.

WITNESS my hand and official seal.

NOTARY PUBLIC