

CRESCENT CITY HOUSE AUTHORITY

235 H STREET
CRESCENT CITY, CA 95531
PHONE: (707) 464-9216

Crescent City Housing Authority (CCHA) Request for Criminal History Information

ALL HOUSEHOLD MEMBERS 18 YEARS AND OLDER MUST COMPLETE THEIR OWN CRIMINAL HISTORY INFORMATION FORM

Legal Name of adult filling out this form: _____

Please initial each line

_____ I understand that false answers, incomplete answers, or omissions on this application will disqualify my application and I have taken due care to ensure the answers given are correct and true.

_____ I understand that a criminal history background check will be conducted based upon personal information I have provided below and that which is contained in my housing assistance application.

_____ I understand that other criminal history checks will be conducted utilizing records and information from Police and Sheriff Agencies where I have lived or have been arrested.

_____ I understand that the criminal background check will also include information on current criminal warrants that may exist.

I hereby authorize the release of my Criminal History information and request that the Criminal Background be done. Below I have provided personal statistical information to facilitate the Criminal History/Background check.

Full Legal Name (Printed): _____

Date of Birth: _____ (mm/dd/yyyy) Age: _____ Social Security #: _____

California Drivers License (or ID) Number: _____

Gender: Male Female -Please Circle

Other Names Used: _____

Are you currently engaged in, or have you engaged (within the last three (3) years) in the use of a controlled substance, drug relate activity and/or alcohol abuse? ☐ Yes ☐ No

Are you a registered sex offender? ☐ Yes ☐ No

I hereby authorize the release of my Criminal History information and request that the Criminal Background Check be completed. Above I have provided the personal statistical information to facilitate the Criminal History/Background check.

Signature

Date