

Haywood Village  
919 Haywood Road  
Asheville, NC 28806  
PHONE: (828) 424-7740  
FAX: (828) 258-2332

CRIMINAL RECORDS CONSENT FORM

The undersigned individual hereby authorizes Haywood Village to request and receive any criminal history record information pertaining to said individual which may be in the files of any state and/or local criminal agency.

Please PRINT clearly

NAME: \_\_\_\_\_

PRESENT ADDRESS: \_\_\_\_\_

CITY/STATE/ZIP CODE: \_\_\_\_\_

DOB: \_\_\_\_\_ SSN: \_\_\_\_\_

SEX: \_\_\_\_\_ RACE: \_\_\_\_\_

RESIDENT SIGNATURE \_\_\_\_\_

DATE: \_\_\_\_\_