



**Housing Trust Fund Corporation  
NY Rising Housing Recovery Program**

**CONSENT AND RELEASE FOR NONPUBLIC PERSONAL INFORMATION**

**INSTRUCTIONS:** Each applicant must fill out this “**Consent and Release Form**” to allow IEM/HORNE), on behalf of the Housing Trust Fund Corporation (HTFC), to request, review and/or share certain nonpublic personal information of you, any co-owner of your property and any of your household members, in order to process your application and otherwise determine your eligibility for assistance from HTFC’s NY Rising Housing Recovery Program (the Program).

You may revoke or end your consent under this form at any time, as indicated below. However, doing so may affect the Program’s ability to process your application and your ability to receive any assistance.

**Consent and Release:**

I \_\_\_\_\_ do hereby consent to, and authorize, HTFC (including its partners, affiliates, agents and contractors, such as IEM/HORNE), to request, review and/or share any and all information received with respect to my application for the Program (“Nonpublic Personal Information” or “NPI”), whether provided by me or by third parties with whom I may or may not have a relationship, as needed to determine my eligibility for the Program and otherwise process the amount of assistance under the Program. I understand and acknowledge that HTFC (including its partners, affiliates, agents and contractors, such as IEM/HORNE), may obtain, use and disclose any NPI it receives with certain third parties (including certain financial institutions, insurers, other government agencies and credit bureaus) in connection with its processing of my application and determination of eligibility for assistance under the Program. I also provide waivers to the Small Business Administration (SBA) and the Federal Emergency Management Agency (FEMA) to provide Duplication of Benefits Information to the HTFC regarding any applications for assistance I have submitted to those federal agencies.

I agree to hold HTFC and its agents, partners, affiliates and contractors (including IEM/HORNE) harmless from and against all claims, actions, suits or other proceedings, and any and all losses, judgments, damages, expenses or other costs (including reasonable counsel fees and disbursements), arising from or in any way relating to any disclosure of my NPI.

I understand that I may revoke or terminate this consent and release at any time by giving written notice to IEM/HORNE on behalf of the HTFC. I further understand and acknowledge that any such revocation (ending) of this Consent may affect my ability to receive assistance under the Program.

**CONSENT AND RELEASE FORM FOR NONPUBLIC PERSONAL INFORMATION**

Owner Last Name \_\_\_\_\_ Application Number \_\_\_\_\_





On the \_\_\_\_ day of \_\_\_\_\_, in the year \_\_\_\_, before me, the undersigned, personally appeared \_\_\_\_\_, personally known to me or proved to me on the basis of satisfactory evidence to be the individual(s) whose name(s) is (are) subscribed to the within instrument and acknowledged to me that he/she/they executed the same in his/her/their capacity (ies), and that by his/her/their signature(s) on the instrument, the individual(s), or the person upon behalf of which the individual(s) acted, executed the instrument.

\_\_\_\_\_  
Notary Public

STATE OF NEW YORK        )  
  ) ss.:  
COUNTY OF                    )

On the \_\_\_\_ day of \_\_\_\_\_, in the year \_\_\_\_, before me, the undersigned, personally appeared \_\_\_\_\_, personally known to me or proved to me on the basis of satisfactory evidence to be the individual(s) whose name(s) is (are) subscribed to the within instrument and acknowledged to me that he/she/they executed the same in his/her/their capacity (ies), and that by his/her/their signature(s) on the instrument, the individual(s), or the person upon behalf of which the individual(s) acted, executed the instrument.

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