

Town of Burrillville Housing Rehabilitation Loan Program

Authorization to Release Confidential Information

I/We have applied for a Home Repair Loan thru the Town of Burrillville Housing Rehabilitation Loan Program.

I/We authorize the Town of Burrillville Planning Department to order a consumer credit report and verify other credit information for the Home Repair Loan I/we are applying for and any other future loans I/we may apply for from the Town of Burrillville Housing Rehabilitation Loan program.

The information obtained is confidential and is only to be used in the processing of my/our application.

_____	_____	_____
Borrower	Borrower's Social Security #	Date
_____	_____	_____
Borrower	Borrower's Social Security #	Date

Town of Burrillville Planning Department
144 Harrisville Main Street
Harrisville, RI 02830
(401) 568-4300 ext. 130, 131