

To Whom It May Concern:

I am a potential tenant/buyer of a condo unit with Punta Rassa Condominium Association.

I hereby authorize any employee of DIVERSIFIED investigations, llc to obtain any and all information, written or oral, typed or hard copy, including any criminal or driving record, police contacts including: arrest information, suspect information, history of medical/mental contacts, warnings, reporting person, investigatory file complaints, grievances, civil, criminal, and any other records relating to my reputation, conduct, and financial and credit status and to provide such information to Punta Rassa Condominium Association.

The intent of this authorization is to provide full and free access to the background and history of my personal life, for the specific purpose of pursuing a background investigation that may provide pertinent data and to provide such information to Punta Rassa Condominium Association to consider in determining my suitability of being a tenant/buyer with Punta Rassa Condominium Association.

It is my specific intent to provide access to personnel information, however personal or confidential it may appear to be. I consent to the release of any and all public and private information to Punta Rassa Condominium Association has concerning me.

I hereby release and hold harmless any individual, institution or agency, including its officers, employees or other related personnel, both individually and collectively from any and all liability for damages of whatever kind, which may at any time result to me, my heirs, my family or associates, or any other person claiming on my behalf because of compliance with this authorization and request to release information or any attempt to comply with it, whether that released information be oral or written in nature. **I direct you to release such information upon request of the representative of DIVERSIFIED investigations, llc, regardless of any agreement I may have made with you previously to the contrary.** Punta Rassa Condominium Association will discontinue processing my application if you refuse to disclose the information requested.

I hereby waive my rights held under Wisconsin Supreme Court decision in Woznicki v. Erickson, 202 Wis. 2d 178, 193 (Wis. 1996), that allows me to inspect, review, personally view, or have produced to me the contents of this background investigation, including having the circuit court review your decision to release these records. I further understand that the released documents may adversely implicate my privacy interest and/or reputation.

A photocopy of this one-page authorization, when supplied by an employee of DIVERSIFIED investigations, llc, shall be for intent and purpose as valid as the original. You may retain the photocopy for your files.

Signature: _____ Date: _____

Printed Full Name: _____

Address: _____

Phone number: _____

Date of Birth: _____

The above named person personally came before me and signed this Authorization for the Release of information and Release form Liability after having had the opportunity to review the same.

Witness PRINTED NAME

Witness SIGNATURE

Consent to Conduct Potential Tenant/Buyer Background Investigation

I understand that I need to submit to a background investigation for Punta Rassa Condominium Association as a possible tenant/owner. I understand that the following personal records are subject to being queried and reviewed by DIVERSIFIED investigations, llc:

<table border="1" style="width: 100%; border-collapse: collapse;"> <tr><td style="text-align: center;"><input checked="" type="checkbox"/></td><td>Social Security/Address Verification</td></tr> <tr><td style="text-align: center;"><input checked="" type="checkbox"/></td><td>Local law enforcement queries</td></tr> <tr><td style="text-align: center;"><input checked="" type="checkbox"/></td><td>Sexual offender database queries</td></tr> <tr><td style="text-align: center;"><input checked="" type="checkbox"/></td><td>Public database queries</td></tr> <tr><td style="text-align: center;"><input checked="" type="checkbox"/></td><td>State criminal/civil queries</td></tr> <tr><td style="text-align: center;"><input type="checkbox"/></td><td>Driver's license records (as applicable to the position)</td></tr> </table>	<input checked="" type="checkbox"/>	Social Security/Address Verification	<input checked="" type="checkbox"/>	Local law enforcement queries	<input checked="" type="checkbox"/>	Sexual offender database queries	<input checked="" type="checkbox"/>	Public database queries	<input checked="" type="checkbox"/>	State criminal/civil queries	<input type="checkbox"/>	Driver's license records (as applicable to the position)	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr><td style="text-align: center;"><input type="checkbox"/></td><td>Professional/Character References</td></tr> <tr><td style="text-align: center;"><input type="checkbox"/></td><td>Neighborhood Canvass</td></tr> <tr><td style="text-align: center;"><input checked="" type="checkbox"/></td><td>Bankruptcy/Lien</td></tr> <tr><td style="text-align: center;"><input type="checkbox"/></td><td>Education and Professional License Verification</td></tr> <tr><td style="text-align: center;"><input type="checkbox"/></td><td>Employment Verification & Reference</td></tr> <tr><td style="text-align: center;"><input checked="" type="checkbox"/></td><td>Credit Report / Civil Litigation</td></tr> </table>	<input type="checkbox"/>	Professional/Character References	<input type="checkbox"/>	Neighborhood Canvass	<input checked="" type="checkbox"/>	Bankruptcy/Lien	<input type="checkbox"/>	Education and Professional License Verification	<input type="checkbox"/>	Employment Verification & Reference	<input checked="" type="checkbox"/>	Credit Report / Civil Litigation
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<input checked="" type="checkbox"/>	Credit Report / Civil Litigation																								

I further understand that the results of this investigation will be forwarded to Punta Rassa Condominium Association and that agents of DIVERSIFIED investigations, llc will not discuss the findings of the investigation with anyone other than appropriate members of the Punta Rassa Condominium Association staff. I understand that the background investigation will not be used for any purpose other than assessing my suitability as a tenant/owner of a condo unit.

Therefore, I do hereby grant permission to Punta Rassa Condominium Association, and DIVERSIFIED investigations, llc, to conduct a background investigation. All information is subject to the Fair Credit Reporting Act (FCRA--see www.consumerfinance.gov/learnmore).

**** NOTE:** I understand that this consent is revocable by providing written notice to **both** DIVERSIFIED investigations, llc and Punta Rassa Condominium Association.

TO BE COMPLETED BY APPLICANT

The Following Information Is for Identification and Investigative Purposes Only.
Please Use an Ink Pen and Print Clearly. Use "UPPER CASE" Letters. One Letter Per Block.

Last Name																																			
First Name																																			
Middle Name																																			
Current Address																					Apt.#														
City																			State	Zip															
Social Security Number																																			
Date of Birth													Sex: (circle one) Male / Female																						
Driver's License No.																			State																
Other Last Names Used (Include Maiden Names)																																			
LIST EVERY CITY AND STATE YOU HAVE EVER LIVED and the Month/Year you lived there	STATE CODE	CITY	MO/YR													STATE CODE	CITY	MO/YR	ADD EXTRA PAGES, AS NEEDED																
Please check one of the following ethnic categories:																																			
White (Not of Hispanic Origin)						Black (Not of Hispanic Origin)						Asian or Pacific Islander						Hispanic						American Indian or Alaskan Native						I do not wish to answer					
Have you ever been convicted OR do you have any charges pending? You must include traffic and local ordinance citations (Provide answer on right). You are required to include convictions that have been EXPUNGED. If YES, list charge(s) and year below.																				<input type="checkbox"/> YES <input type="checkbox"/> NO															
																				Does not automatically bar you from employment/volunteering															
Charge												Year						Charge												Year					

Applicant Signature: _____

Date: _____

My consent will remain in force for a period no longer than a year from the date this document is signed.