



JOINT MUNICIPAL HOUSING COOPERATIVE

**Bladenboro Housing Authority
Bladen Housing Authority**

STEVIE CRAIG
EXECUTIVE DIRECTOR

GENERAL AUTHORIZATION

I, _____, DO HEREBY AUTHORIZE THE JOINT MUNICIPAL HOUSING COOPERATIVE, AND IT'S STAFF, TO CONTACT ANY AGENCIES, OFFICES, GROUPS OR ORGANIZATIONS TO OBTAIN ANY INFORMATION OR MATERIALS WHICH IS DEEMED NECESSARY TO COMPLETE MY APPLICATIONS FOR PARTICIPATION IN THE HOUSING PROGRAM.

SIGNED: _____

DATE: _____

WITNESS: _____