



Equal Housing Opportunity  
TDD: (800) 649-3777



**P.O. Box 405  
Gladwin, MI 48624**

**TENANT EMERGENCY INFORMATION**

(The completion of this form is used to protect our residents in the event of emergency.)

- 1. **Apartments** \_\_\_\_\_ **City** \_\_\_\_\_
- 2. **Tenant Name** \_\_\_\_\_ **Unit #** \_\_\_\_\_
- 3. **Address** \_\_\_\_\_ **Tel.#** \_\_\_\_\_
- 4. **Persons to contact in case of emergency and who would be allowed in your apartment to remove your belongings:**

Name	Phone #	Name	Phone #
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**IF I SHOULD DIE OR BECOME INCOMPETENT AND IN THE SOLE JUDGMENT OF THE OWNER IT IS IMPRACTICAL TO REFUND ANY OF MY SECURITY DEPOSIT TO ME, THEN IT SHOULD BE PAID TO ONE OF THE TWO PERSONS LISTED BELOW. ANY FURNITURE OR OTHER PERSONAL PROPERTY LEFT IN MY APARTMENT AT THE TIME OF VACATING MAY BE TURNED OVER TO ANY ONE OF THE PERSONS LISTED BELOW:**

**Name:** \_\_\_\_\_ **Phone:** \_\_\_\_\_

**Address:** \_\_\_\_\_ **City, State, Zip:** \_\_\_\_\_

**Relationship to you:** \_\_\_\_\_

**Name:** \_\_\_\_\_ **Phone:** \_\_\_\_\_

**Address:** \_\_\_\_\_ **City, State, Zip:** \_\_\_\_\_

**Relationship to you:** \_\_\_\_\_

**Signature**

**Date**

*"This institution is an equal opportunity provider and employer."*

*If you wish to file a Civil Rights program complaint of discrimination, complete the USDA Program Discrimination Complaint Form, found online at [http://www.ascr.usda.gov/complaint\\_filing\\_cust.html](http://www.ascr.usda.gov/complaint_filing_cust.html), or at any USDA office, or call (866) 632-9992 to request the form. You may also write a letter containing all of the information requested in the form. Send your completed complaint form or letter to us by mail at U.S. Department of Agriculture, Director, Office of Adjudication, 1400 Independence Avenue, S.W., Washington, D.C. 20250-9410, by fax (202) 690-7442 or email at [program.intake@usda.gov](mailto:program.intake@usda.gov).*

*"Title 18, Section 1001 of the U.S. Code states that a person is guilty of a felony for knowingly and willingly making false or fraudulent statements to any department of the United States Government. HUD and any owner (or any employee of HUD or the owner) may be subject to penalties for unauthorized disclosures or improper uses of information collected based on the consent form. Use of the information collected based on this verification form is restricted to the purposes cited above. Any person, who knowingly or willingly requests, obtains or discloses any information under false pretenses concerning an applicant or participant may be subject to a misdemeanor and fined not more than \$5,000. Any applicant or participant affected by negligent disclosure of information may bring civil action for damages and seek other relief, as may be appropriate, against the officer or employee of HUD or the owner responsible for the unauthorized disclosure or improper use. Penalty provisions for misusing the social security number are contained in the Social Security Act at \*\*208 (a) (6), (7) and (8). \*\* Violation of these provisions are cited as violations of 42 U.S.C Section \*\*408 (a) (6), (7) and (8). \*\**