

## Communication Authorization

**Head of Household:** \_\_\_\_\_

**Person requesting protections:** \_\_\_\_\_

Broward County Housing Authority (BCHA) is required to take precautions to avoid inadvertent disclosure of confidential information to another individual or entity. Under the Violence Against Women Act (VAWA), unless given permission from the victim to do so, BCHA must not leave messages that contain confidential information or refer to VAWA on the victim's voicemail or with other individuals, including members of the household. In addition, BCHA will not send mail or email in relation to VAWA without the authorization of the person listed above as the perpetrator may have access to these items.

BCHA is authorized to contact me regarding VAWA through the following methods:

	Yes	No	
			1. Contact my attorney, advocate, or other secure contact you would like us to contact, as listed below:  Name: _____  Telephone #: _____
			2. Via telephone/cell phone: (    ) _____-_____
			3. Leave messages on telephone/cell phone listed above
			4. Via e-mail: _____@_____
			5. Via US postal mail to the subsidized address
			6. Via US postal mail to an alternate address: Alternate mailing address:  _____  _____

The above authorization is valid until \_\_\_\_\_20\_\_\_\_\_. I understand I may revoke this consent at anytime and will contact BCHA to do so.

\_\_\_\_\_  
Signature Date