

IMPORTANT INSTRUCTIONS

1. Please fill out the form in BLOCK letters.
2. Please do not make any changes to this section:

C. Informed Consent

SEARCH AUTHORIZATION – I HEREBY CONSENT TO THE SEARCH OF the RCMP National Repository of Criminal Records based on the name(s), date of birth and where used, the declared criminal record history provided by myself. I understand that this verification of the National Repository of Criminal Records is not being confirmed by fingerprint comparison which is the only true means by which to confirm if a criminal record exists in the National Repository of Criminal Records.

POLICE INFORMATION SYSTEM(S) – I HEREBY CONSENT TO THE SEARCH OF police information systems, as part of a Criminal Record and Judicial Matters Check, which will consist of a search of the following systems (check applicable):

CPIC Investigative Data Bank

Police Information Portal (PIP)

CRIMINAL RECORD CHECK (CRC)
Declaration of Criminal Record Form

Declaration of Criminal Record

This form is required to be filled and attached to your Informed Consent Form for a Criminal Record Check (CRC).

Surname (last name) _____ Given name(s) _____ Date of Birth: _____
YYYY-MM-DD

Information is collected and disclosed in accordance with federal, provincial and municipal laws.

A Declaration of Criminal Record does not constitute a Certified Criminal Record by the RCMP and may not contain all criminal record convictions.

Applicants must declare all convictions for offences under Canadian federal law.

Do not declare the following:

- A conviction for which you have received a Record Suspension (formerly pardon) in accordance with the *Criminal Records Act*;
- A conviction where you were a "young person" under the *Youth Criminal Justice Act*;
- An Absolute or Conditional Discharge, pursuant to section 730 of the *Criminal Code*;
- An offence for which you were not convicted;
- Any provincial or municipal offence, and;
- Any charges dealt with outside of Canada.

Note that a Certified Criminal Record can only be issued based on the submission of fingerprints to the RCMP National Repository of Criminal Records.

Offence	Date of Sentence	Court Location

Signature of Applicant

Date (YYYY-MM-DD)

**CONSENT TO PERFORM CRIMINAL HISTORY BACKGROUND CHECK IN
COMPLIANCE WITH THE FCRA
(FAIR CREDIT REPORTING ACT)**

This authorization and consent for release of personal information acknowledges that **Tamiami Master Association** (Hereafter referred to as "Company") and/or its agent, C4 Operations LLC may now, or at any time renting from conduct investigations whether the records are of a public, private or confidential nature. These investigations might include, but are not limited to, searches of educational institutions attended; state driving records; financial or credit institutions, including records of loans; records of commercial or retail credit agencies; other financial statements; records of previous employment, including work rental history, efficiency ratings, complaints and grievances filed by or against me; records and recollections of attorney-at-law or of other counsel, whether representing me or any other person (in either a civil or criminal case in which I have been involved); records from the U.S. Veterans' Administration; criminal history information of file in local, state or federal agencies; and motor vehicle records. I understand that these searches will be used to determine renting eligibility under the company's renting policies. Therefore, I authorize and consent for full release of records (either orally or in writing) to the authorized representatives of the company. In addition, I release and discharge the company and its agent and associates to the full extent permitted by law from any claims, damages, losses, liabilities, costs expenses or any other charge or complaint filed with any agency arising from retrieving and reporting this information. I understand that according to the Federal Fair Credit Reporting Act, I am entitled to know whether occupancy was denied based upon the information obtained and to receive, upon written request, a disclosure of the background report. I also understand that I may request a copy of the report from **C4 Operations LLC, 1201 Edgewood Rd SW, Cedar Rapids, IA 52404** at telephone number (319) 491-6300. After reading this document, I fully understand its contents and authorize the background verification.

Signed this _____ day of _____, 20 _____

Applicant (Print Name)

Applicant Signature

These documents should NOT be construed as legal advice, guidance or counsel. Companies should consult their own attorney about their compliance responsibilities under the Fair Credit Reporting Act, as well as applicable state and international laws. C4 Operations / Owens OnLine LLC expressly disclaims any warranties, responsibilities, or damages associated with, or arising out of, information provided. Companies seeking credit reports must provide additional notices pursuant to state law.

[IMPORTANT -- PLEASE READ CAREFULLY BEFORE SIGNING DISCLOSURE]

DISCLOSURE REGARDING "CONSUMER REPORT" BACKGROUND INVESTIGATION

Company Name TAMIAMI MASTER ASSOCIATION ("Company") may obtain information about you from a third party consumer reporting agency. Thus, you may be the subject of a "consumer report," which may include information about your character, general reputation, personal characteristics, or mode of living. These reports may include information regarding your credit history, criminal history, identity verification, motor vehicle records ("driving records"), verification of your education or employment history, or other background checks.

You have the right, upon written request made within a reasonable time, to request whether a consumer report has been run about you and to request a copy of your report. These reports will be conducted by C4 Operations, Cedar Rapids IA and Owens OnLine LLC, 3802 Ehrlich Road, Suite 307, Tampa, FL 33624, (800) 745-4656, www.owens.com. The scope of this disclosure is all-encompassing allowing Company to obtain from any outside organization all manner of consumer reports throughout the course of your relationship with the Company to the extent permitted by law.

Printed Name: _____

Signature: _____ Date: _____

[IMPORTANT -- PLEASE READ CAREFULLY BEFORE SIGNING DISCLOSURE]

These documents should NOT be construed as legal advice, guidance or counsel. Companies should consult their own attorney about their compliance responsibilities under the Fair Credit Reporting Act, as well as applicable state and international laws. C4 Operations / Owens OnLine LLC expressly disclaims any warranties, responsibilities, or damages associated with, or arising out of, information provided. Companies seeking credit reports must provide additional notices pursuant to state law.

EUROPEAN UNION (EU) EMPLOYERS PLEASE CHECK THE APPLICABLE BOXES BEFORE HAVING APPLICANT SIGN

[IMPORTANT -- PLEASE READ CAREFULLY BEFORE SIGNING AUTHORIZATION]

DATA PRIVACY NOTICE

Company Name TAMIAMI MASTER ASSOCIATION ("Company") may obtain information about you to verify and investigate your background for rental application purposes from a third party, including C4 Operations, Cedar Rapids, IA , Owens OnLine LLC, 3802 Ehrlich Road, Suite 307, Tampa, FL 33624, USA or their representative Owens Europe GmbH, Medipark 1, D-83088 Kiefersfelden, Germany (collectively "Owens").

Information you have or will supply, may be disclosed to third parties including agents or vendors of the above named entities, law enforcement agencies, state or federal agencies, courts, institutions, schools or universities (public or private), information service bureaus, employers, employees or insurance companies to verify and investigate your background.

In accordance with the host nation's laws and the laws applicable to you depending on your location regarding the release of information, you understand that information may be transmitted from any country to the above listed parties located in any country, including countries outside the EU that have a different level of data protection or inadequate data protection laws as defined by the European Commission than your country of residence.

For access to the personal data collected or transferred, to your report, or for any other inquiries or complaints you may contact Company or C4 Operations, Cedar Rapids IA or at Owens. Owens' privacy policy is available at www.owens.com/privacy-policy. Owens affords individuals the opportunity to choose whether their personal information will be disclosed to a third party as described above. A consumer can withdraw consent by contacting Company and/or by contacting Owens in writing or by e-mail at the addresses listed on www.owens.com/contact-us. If choosing to withdraw your consent your background check, if still in progress, will not be completed. This may affect Company's decision related to the purpose in which the background check was requested.

THIS IS ONLY FILLED OUT IF THE COUNTRY YOU LIVE IN IS PART OF THE EU

EU applicants only: Company has determined the report(s) selected below are necessary for the proposed employment relationship with you.

- | | |
|---|--|
| <input type="checkbox"/> Credit Reports | <input type="checkbox"/> Civil Reports (including Lawsuit, Lien, Judgment, Bankruptcy, Insolvency) |
| <input type="checkbox"/> Criminal Reports | <input type="checkbox"/> Identity Reports (including ID Checks, Address Checks, Property Checks) |
| <input type="checkbox"/> Motor Vehicle Reports | <input type="checkbox"/> Education, Employment, License, Association and Reference Verifications |
| <input type="checkbox"/> Media or Adverse Lists | <input type="checkbox"/> Verification of any other data in your CV (Curriculum Vitae) |

Outside the EU applicants or employees only: These background report(s) may contain information regarding your credit history, criminal history, identity verification, motor vehicle records, verification of your education or employment history, or other background checks. The report(s) may include information about your character, general reputation, personal characteristics, or mode of living, and which can involve personal interviews with sources such as your neighbors, friends or associates.

Printed Name: _____

Signature: _____ Date: _____

These documents should NOT be construed as legal advice, guidance or counsel. Companies should consult their own attorney about their compliance responsibilities under the Fair Credit Reporting Act, as well as applicable state and international laws. C4 Operations / Owens OnLine LLC expressly disclaims any warranties, responsibilities, or damages associated with, or arising out of, information provided. Companies seeking credit reports must provide additional notices pursuant to state law.

[IMPORTANT -- PLEASE READ CAREFULLY BEFORE SIGNING AUTHORIZATION]
ACKNOWLEDGMENT AND AUTHORIZATION

USA Applicants Only: I acknowledge receipt of the DISCLOSURE REGARDING BACKGROUND INVESTIGATION and A SUMMARY OF YOUR RIGHTS UNDER THE FAIR CREDIT REPORTING ACT and certify that I have read and understand both of those documents.

Applicants with Personal Data from Outside the USA Only: I acknowledge receipt of the DATA PRIVACY NOTICE and certify that I have read and understand the document.

I hereby freely authorize the collection, processing and use of my personal data for the obtaining of background reports, "consumer reports" or "investigative consumer reports," for rental screening by "**Company**" TAMAMI MASTER ASSOCIATION at any time after receipt of this authorization and throughout my tenancy, if applicable. To this end, I hereby authorize, without reservation, all third parties who are asked to provide information concerning me, including, but not limited to, any law enforcement agency, administrator, state or federal agency, institution, school or university (public or private), information service bureau, employer, or insurance company to furnish any and all background information requested by C4 Operations, Cedar Rapids, IA , and Owens OnLine LLC, 3802 Ehrlich Road, Suite 307, Tampa, FL 33624, (800) 745-4656, www.owens.com and/or Company itself. In accordance with the host nation's laws and the laws applicable to me depending on my location regarding the release of information, I authorize the release and transmittal of information from any country to the above listed parties, their clients, and/or their agents or vendors located in any country, including countries outside the European Union that may have a different level of data protection or inadequate data protection laws as defined by the European Commission. I agree that a facsimile ("fax"), electronic or photographic copy of this Authorization shall be as valid as the original.

New York Applicants Only: Upon request, you will be informed whether or not a consumer report was requested by Company, and if such report was requested, informed of the name and address of the consumer reporting agency that furnished the report. You have the right to inspect and receive a copy of any investigative consumer report requested by Company by contacting the consumer reporting agency identified above directly. By signing below, you acknowledge receipt of ARTICLE 23-A OF THE NEW YORK CORRECTION LAW.

New York City Applicants Only: You acknowledge and authorize Company to provide any notices required by federal, state or local law to you at the address(es) and/or email address(es) you provided to the Employer.

Minnesota and Oklahoma Applicants Only: Please check this box, if you would like to receive a copy of a consumer report, if one is obtained by Company.

Washington State Applicants Only: You also have the right to request from the consumer reporting agency a written summary of your rights and remedies under the Washington Fair Credit Reporting Act.

Printed Name: _____

Signature: _____ Date: _____

DATA COLLECTION FORM



General Information		Applicant: Please print clearly in capital letters.	
First Name ▼	Middle Name ▼		
Last Name ▼		Date of Birth (yyyy/mm/dd) ▼	
Other First Name(s) Used (nickname, former name, etc.) ▼		Other Middle Name(s) Used ▼	
Other Last Name(s) Used (maiden name, former name, etc.) ▼			
Current Address (unit number, street number, street, city, postal code, country) ▼			
Email Address ▼		Telephone Number ▼	
Social Insurance Number		Applicant: Please complete if a Canadian Credit Inquiry or SIN Validation is requested.	
Providing your SIN is OPTIONAL. If a Canadian Credit Inquiry or a SIN Validation is requested, your SIN may help us find your credit file or validate your SIN. If these services are not requested, please do not provide your SIN.		Social Insurance Number ▼	<input type="checkbox"/> I decline to provide my SIN.

PRIVACY NOTICE & CONSENT FORM



Privacy Notice

Applicant: Please read the following sections carefully.

To evaluate your suitability for employment or another business relationship, C4 Operations ("the Company") will ask Sterling Talent Solutions Canada Corp. and its parent, affiliates and subsidiaries ("Sterling", "we" or "us") to create a background check report or reports ("Reports") consisting of one or more background check services ("Services"). **Collection:** We may collect the following types of personal information about you: identification information and documents; photograph; address history; police records; court records; employment history, including fiduciary or directorship responsibilities; education history; financial information, including credit history, bankruptcy and financial judgments; driving records; membership, registration or disciplinary action with regulatory or professional bodies; inclusion on watch or sanctions lists; social media activity; mentions in online or print media; or opinions about your performance, qualifications and character. We may collect personal information directly from you, the Company, or third parties such as police, courts, employers, educational institutions, consumer reporting agencies, government agencies, regulatory or professional bodies, references you provide and publicly available print or online sources. We may compare information received from different sources for consistency. The exact types and sources of personal information will depend on the Services requested by the Company. **Use:** Our data entry, order fulfillment, quality assurance, client service, finance and compliance teams may use your personal information to complete Services, prepare Reports and communicate with you or the Company. These teams include our employees in Canada, the Philippines, India and the United Kingdom. Personal information may be transferred to additional countries if we need to collect personal information from those countries or use a language other than English or French. Wherever your information is transferred, it will be handled in accordance with our privacy and security policies and Canadian laws, but it may also be subject to foreign laws. **Disclosure:** We will disclose your personal information to the Company. We may also disclose information, such as your name, date of birth, identifying numbers, signature, contact information, and relationship with the Company, to third parties as necessary for them to provide your personal information to us. **Storage and retention:** We will store your personal information on servers located in Calgary, Alberta, Canada. We will keep your personal information for as long as we need it to complete the Services, deliver and maintain Reports for the Company and fulfill our legal and contractual obligations, after which it will be destroyed. **Your rights:** You have a right to access your personal information, dispute its accuracy or completeness, be told its sources and to whom it has been disclosed, and modify or withdraw your consent for its collection, use and disclosure. You have a right to ask questions or complain about how we handle your personal information. To do any of these things, contact one of our Privacy Analysts at privacy@sterlingts.com, 1-866-455-5671 or Suite 200, 19433 96 Ave, Surrey BC V4N 4C4. For more information about our privacy and security policies, go to www.sterlingts.com/privacy. To understand what Services will be ordered, why Reports are being requested, what will be done with personal information disclosed to the Company, or the consequences of not providing your personal information, please speak to your contact with the Company.

Consent for Collection, Use and Disclosure of Personal Information

Applicant: Please read and sign.

By signing below, I acknowledge that I have read the privacy notice above and consent to the collection, use and disclosure of my personal information as described in it, effective immediately and continuing for a period of one (1) year. I certify that personal information provided to Sterling and the Company is complete and accurate to the best of my knowledge, and I understand that providing inaccurate, incomplete or misleading information may disqualify me from consideration by the Company.

Applicant Signature

X

Date (yyyy/mm/dd)

Print Full Name ▼