



837 MAIN STREET
RACINE, WISCONSIN 53403

Management Agent Authorization

This authorization is to be used only if a Management Agreement is not available. If a Management Agreement is available, please provide a copy.

Property Address: _____
Property Address: _____
Property Address: _____
Property Address: _____
Property Address: _____

Authorization

I, _____ (legal owner name) hereby authorize
_____ (agent name) to conduct the following
business with the Housing Authority of Racine County (HARC) on my behalf for the unit(s) listed above:

- Contract with HARC and tenant (sign lease and HAP Contract)
- Receive Housing Assistance Payments (HAP) and tenant rent payments
- Grant access to the rental unit
- Access contract and payment information, including through Assistance Check online web portal

Agent Name: _____
Agent Address: _____
Agent City, State, Zip: _____
Agent Phone: _____
Agent eMail: _____

This authorization is for the listed unit(s) only.

Legal Owner Signature: _____ Date: _____