

**Photo/Video Release Form**

I, \_\_\_\_\_, grant permission to the Georgia Department of Community Affairs and its agents and employees the irrevocable and unrestricted right to reproduce the photographs and/or videos taken of the rehabilitation/reconstruction work completed on my home, located at \_\_\_\_\_, for the purpose of publication, promotion, illustration, advertising, or trade, in any manner or medium.

I hereby release the Georgia Department of Community Affairs and its legal representatives for all claims and liability relating to said photographs and/or video. Furthermore, I grant permission to use my statements provided during any interview, with or without my name, for the use of advertising and publicity without restriction. I waive my right to any compensation.

\_\_\_\_\_  
Homeowner Printed Name

\_\_\_\_\_  
Homeowner Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Additional Homeowner Printed Name

\_\_\_\_\_  
Additional Homeowner Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Witness Printed Name

\_\_\_\_\_  
Witness Signature

\_\_\_\_\_  
Date

Unique Application ID: \_\_\_\_\_