

REQUEST FOR RENTAL HISTORY INFORMATION

Authorization

I hereby authorize _____ to release information regarding my rental history.
(Current Landlord)

Landlord Telephone #: _____

Applicant Name: _____

Applicant Signature: _____ Date: _____

Resident Address:
Street: _____ Apt. _____ City: _____ State: _____

Move-In Date: _____ Lease Expiration Date: _____

Rental Amount: \$ _____ Additional Monthly Charges: YES NO

If YES: Amount \$ _____ Reason: _____

Have you ever been evicted? _____ When: _____

To be completed by Landlord

Is the account current? <input type="checkbox"/> YES <input type="checkbox"/> NO	Was sufficient notice given? <input type="checkbox"/> YES <input type="checkbox"/> NO
Does Resident Pay on Time? <input type="checkbox"/> YES <input type="checkbox"/> NO	If NO, Please indicate number of late payments: _____
Any NSF's: <input type="checkbox"/> YES <input type="checkbox"/> NO	Number of Returned Checks _____
Dispo's Filed? <input type="checkbox"/> YES <input type="checkbox"/> NO	Number of Dispo's Filed _____
Pets? <input type="checkbox"/> YES <input type="checkbox"/> NO	Number of Pets _____

Additional Comments:

Completed By: _____ Title: _____ Contact Information: _____
Signature: _____ Date: _____