



RENTAL VERIFICATION

TO:	PLEASE RETURN TO:
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The individual signed below has submitted a rental application to our community. Please provide the information requested and fax this form back to our office. Thank you for your prompt response.

Name of Applicant (please print) _____

I hereby authorize release of the information requested below for my rental address at:

_____ STREET CITY STATE ZIP

Applicant Signature _____ Date _____

Spouse Signature _____ Date _____

↓ (Information below to be completed by Landlord) ↓

Move-In Date: _____ Lease Ending / Move-Out Date: _____

Amount of Rent: \$ _____ # of Late Payments _____ # of NSF checks: _____

Is there currently any past due amount owed on the resident's account? YES NO

Has the resident complied with all community policies? YES NO

If NO, please explain _____

Does this resident keep an animal on the premises? YES NO

If YES, has the animal at any time caused a problem or been a nuisance? YES NO

Has the resident ever had a bedbug or other pest infestation in the home? YES NO

If YES, what type of pest infestation _____? Has infestation been eradicated? YES NO

Have legal proceedings ever been filed on this resident? YES NO

Please note if the applicant is a current resident or a past resident at your community.

If this is NOT a current resident, was proper notice given? YES NO

If this is NOT a current resident, was the security deposit refunded? YES NO

If this is NOT a current resident, was the lease fulfilled? YES NO

Is resident eligible for re-rental? YES NO

Telephone _____

Signature _____

Date _____

Printed Name & Title _____