



Rental History Verification Request Form

Prospective Owner/Agent _____

Phone: _____

Fax: _____

Email: _____

To Owner/Agent _____

Address: _____

Fax: _____

Phone: _____

By signing below, I authorize the above mentioned owner/agent to completely and accurately answer these questions regarding my residency. I hereby release them from any liability for the answers provided.

Applicant Name: _____ Date: _____

Applicant Signature: _____

Please completely the following information and fax back to: _____
We appreciate your prompt response. Thank you!

Applicant: _____ Co-Applicant: _____

Rental Amount: \$ _____

Is Rental Paid On-Time? ___ Yes ___ No Number of NSF's: _____ Number of Late Payments: _____

Number of Lease Violations: _____ Explain: _____

Was Proper Termination Notice Given? ___ Yes ___ No Explain: _____

Total Balance Remaining: \$ _____

Would you Re-Rent? ___ Yes ___ No Explain: _____

Completed by: _____ Title: _____

Signature: _____ Date: _____

