RENTAL VERIFICATION FORM

Name of Applicant:_____

Apartment #:_____ Rent:_____ Security Deposit:_____

	Current Residence	Previous Residence
1. Who am I talking to/speaking with?	_____	_____
2. How Long Did Tenant Reside There?	_____	_____
3. How many people lived at the residence?	_____	_____
4. How many vehicles did the tenant have?	_____	_____
5. Are You a Personal Friend or Relative?	YES NO	YES NO
6. Did the Tenant Pay Rent on Time?	YES NO	YES NO
7. Did Tenant Bounce a Check?	YES NO	YES NO
8. Do They Have Any Pets?	YES NO	YES NO
9. Did Tenant Have 3 Day/30 Day Notices?	YES NO	YES NO
10. Any Damages to Apartment?	YES NO	YES NO
11. Did You Return Full Deposit?	YES NO	YES NO
12. Were There Ever Any Complaints?	YES NO	YES NO
13. Would You Rent to Them Again?	YES NO	YES NO

Circle One.

Credit Report Status: EXCELLENT GOOD FAIR POOR

Income Verification: (Current & Previous)

_____/_____ _____/_____

Employer Monthly Earnings

_____/_____ _____/_____

Length of Employment Person you spoke with

Called Tenant for: ACCEPTANCE DENIED