

# RENTAL HISTORY VERIFICATION

The individual named below is an applicant/resident of a housing program that requires verification of rental history. The information provided will remain confidential and used only to determine eligibility. Please complete and return promptly.

DATE: \_\_\_\_\_

DEVELOPMENT NAME: \_\_\_\_\_

EMAIL: \_\_\_\_\_

PHONE: \_\_\_\_\_ FAX: \_\_\_\_\_

DEVELOPMENT NAME: \_\_\_\_\_

EMAIL: \_\_\_\_\_

PHONE: \_\_\_\_\_ FAX: \_\_\_\_\_

**RELEASE STATEMENT FOR APPLICANT/RESIDENT** I hereby authorize the above-named management agent to make inquiries regarding release of information for the purpose of determining my eligibility for occupancy.

**PRINTED NAME:** \_\_\_\_\_

**SIGNATURE:** \_\_\_\_\_

## The following is to be completed by company representative

Please fill in ALL blanks. Enter N/A if an item is not applicable to the above individual.  
(Note: Information provided may require additional documentation)

Rental Address: \_\_\_\_\_

Rental Status?  Current  Previous

Property Type?  House  Apartment  Room  Other: \_\_\_\_\_

Rental Start Date: \_\_\_\_\_ Rental End Date: \_\_\_\_\_

Monthly Rental Rate: \$ \_\_\_\_\_ Was it paid on time?  Yes  No

Outstanding Monies Owed:  Yes  No If yes, amount: \$ \_\_\_\_\_

# of Occupants: \_\_\_\_\_ Names: \_\_\_\_\_

Are you related to anyone listed in this household by blood/marriage?  Yes  No

Reason for Moving: \_\_\_\_\_

Proper Notice Given?  Yes  No

### GENERAL QUESTIONS

Households care of rental unit?

Good  Fair  Poor

Was the property left in rentable condition after move out?

Yes  No

Was the property damaged during occupancy?

Yes  No

Were there any complaints made against household?

Yes  No

Was household responsible for paying utilities?

Yes  No

Did the household have pets?

Yes  No

Type: \_\_\_\_\_

Would you rent to anyone in this household again?

Yes  No

### AUTHORIZED REPRESENTATIVE:

I certify that the above information is true and correct to the best of my knowledge.

Signature/Title: \_\_\_\_\_

Date: \_\_\_\_\_

Printed Name: \_\_\_\_\_

Direct Phone: \_\_\_\_\_

Company Name: \_\_\_\_\_

Email: \_\_\_\_\_

