



Rental Verification Form

If you have any questions, please don't hesitate to give us a call!

Applicant(s) _____

Previous Address _____

Landlord _____

Lease Start Date _____ Lease End Date _____

Did they have any roommates? Yes _____, How many? _____ No _____

Monthly Rent \$ _____

Did they pay late? Yes _____, How many times? _____ No _____

Did you ever have to file eviction? Yes _____, How many times? _____ No _____

Was lease fulfilled? Yes _____ No _____

Did they give you proper notice? Yes _____ No _____

Any returned checks? Yes _____ No _____ If yes, how many? _____

Any noise complaints? Yes _____ No _____ Pet Violations? Yes _____ No _____

Would you rent to them again if they qualify? Yes _____ No _____

If no, please explain _____

Date: _____ Verified by: _____

Thank you so much!!