TENANT SCREENING

TENANT CREDIT REPORTS

AUTHORIZATION RELEASE FORM

Tenant Name: _____

Social Security #:_____

Date of Birth: _____

Tenant 2 Name: _____

Social Security #:_____

Date of Birth: _____

Present Address: _____

Former Address: _____

Landlord's Name and telephone: _____

Current Employer's name and telephone: _____

_____

Personal References:

1. _____
2. _____
3. _____

TENANT SCREENING

I (we) certify that the name, social security, and address(s) given are true and correct to the best of my (our) knowledge. You are hereby authorized to make any investigation of my (our) personal and financial history and pull a credit report through Tenant Credit Reports. I (we) hereby authorize the release of all information, including credit, employment, salary, and rental information to Tenant Credit Reports. I (we) are willing that a photocopy of this authorization be accepted with the same authority as the original.

Signature(s):

Applicant: _____Date:_____
Co-Applicant: _____Date:_____