

Background Check Authorization Form RENTAL

Unmarried Co-Applicants Fill Out a Separate Application. Do NOT leave any blank spaces.

Name	SS#
NameLast First MI	
DOB / Alias Names	
Month Day Year	
Driver's License # State	(Please Attach Copy to Application)
Phone: ()	
Spouse	SS#
Last First MI	
DOB / / Alias Names	
Month Day Year	
Driver's License #State	(Please Attach Copy to Application)
Phone: ()	
Present Address Street Apt. # City ST Zip	
Street Apt. # City ST Zip	
From To	
Previous Address	
Street Apt. # City ST Zip	
From To	
Have you ever had adjudication withheld or been co	
Applicant: Yes No Co-Applicant: Yes	, No
AUTHORIZATION OF RELEASE OF INFORMATI	
above information and statements on the application	
authorizes an investigative consumer report includir	
or mortgage), employment history, criminal history re	
authorization must be signed before it can be	
acknowledges that false or omitted information here	
application, termination of right of occupancy, and/	
constitute a criminal offense under the laws of this S	State.
NON-REFUNDABLE APPLICATION FEE – Applica	ant(s) agree(s) to pay \$25.00 per person for a
non-refundable application processing fee.	
Applicant's Signature:	Date:
Spouse's Signature:	Date:
Other's Signature:	Date: