LANDLORD REFERENCE FORM



LANDLORD INFORMATION		APPLICANT INFORMATION	
COMPANY NAME		APPLICANT NAME	
CONTACT NAME		DATE OF REQUEST	
ADDRESS OF RENTAL PROPERTY		ADDRESS OF RENTAL PROPERTY	
PHONE		PHONE	
FAX		FAX	
EMAIL		EMAIL	
REQUESTED INFORMATION			
MOVE IN DATE		MOVE OUT DATE	
MONTHLY RENT AMOUNT		DID TENANT MAKE TIMELY PAYMENTS?	
WERE THERE ANY NSF CHECKS?		WAS AN EVICTION FILED?	
DID THE TENANT GIVE PROPER NOTICE?			
DID THE TENANT TAKE PROPER CARE OF THE UNIT?			
WOULD YOU RENT TO THIS PERSON AGAIN?			
PLEASE LIST ANY PROBLEMS OR ISSUES			
ADDITIONAL COMMENTS			
REQUESTING PARTY INFORMATION			
COMPANY NAME		COMPANY	
CONTACT		ADDRESS	
PHONE			
FAX		EMAIL	

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