



LANDLORD VERIFICATION

TO: _____
RE: _____

DATE _____

The above named tenant currently or previously resided at:

and has applied for residency with **Rock Towne**. Your cooperation in answering the following questions will be appreciated. When you have completed this form kindly sign in the space provided and return it to us by fax or in the enclosed self-addressed stamped envelope.

1. Was rent paid on time? (Rental Amount \$ _____/month YES ___ NO ___
Comments _____

2. Was unit maintained in a safe and sanitary manner? YES ___ NO ___
Comments _____

3. Was there any problems with neighbors YES ___ NO ___
Comments _____

4. Were there any tenant-caused damages? YES ___ NO ___
Comments _____

5. Were children or pets supervised? YES ___ NO ___
Comments _____

6. Would you rent to this person or family again YES ___ NO ___
Comments _____

ADDITIONAL COMMENTS

I hereby authorize the person, to whom this application is made, or any credit bureau or other investigative agency employed by such person, to investigate any references herein listed or statements or other data obtained from me or from any other person pertaining to my credit and financial responsibility

Date _____ SIGNATURE _____