



**Rental Verification**

**APPLICANT:** Please complete the TOP SECTION ONLY of this form, and then forward it to your landlord to complete the bottom section and return it to us.

***I hereby authorize the release of my information by my landlord and request my landlord to complete this verification form:***

APPLICANT NAME: \_\_\_\_\_

SIGNATURE: \_\_\_\_\_

DATE: \_\_\_\_\_

PROPERTY APPLYING FOR: \_\_\_\_\_

**LANDLORD INFORMATION:**

COMPANY NAME: \_\_\_\_\_ EMAIL: \_\_\_\_\_

LANDLORD NAME: \_\_\_\_\_ FAX: \_\_\_\_\_

PHONE: \_\_\_\_\_

**LANDLORD:** Thank you very much for completing the below section of this form and returning it to us via **EMAIL: ed@hawkmgmt.com** or via **FAX: (424) 217-5228**. Please feel free to call us at (424) 777-9848 with any questions. THANKS!

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**THIS SECTION TO BE COMPLETED BY LANDLORD:**

Tenancy: Move-In Date: \_\_\_\_\_ Move-Out Date: \_\_\_\_\_

Does the Tenant pay on time?     Yes     No

Has this tenant ever paid late?     Yes     No    If yes, how many times? \_\_\_\_\_

Have you ever had any problems with this Tenant?     Yes     No

Did you receive sufficient notice of intent to move?     Yes     No

Comments: \_\_\_\_\_

\_\_\_\_\_  
Signature of Person Verifying

\_\_\_\_\_  
Date