

**EMPLOYER
VERIFICATION REQUEST & RELEASE**

THIS SECTION TO BE COMPLETED BY APPLICANT

PERMISSION TO RELEASE PERSONAL INFORMATION
(APPLICANT TO INITIAL BESIDE EACH STATEMENT LISTED BELOW)

Initial Below

_____ I do hereby authorize the release of any and all personal information as requested by _____
In connection with the approval process of my rental application.

_____ I do hereby indemnify and hold harmless and blameless my employers and in _____
In all matters concerning the transfer and use of this information.

_____ I do hereby authorize the verification of my application.

_____ I do hereby give all parties permission to make copies of this authorization and to treat _____
Such copies or facsimiles as an original.

Having read & approved the employer questions, I would appreciate employers answering them.

Applicant's Name (Print): _____

Applicant's Signature: _____ Date: ____/____/____

APPLICANT SHALL RETURN THIS FORM TO OR FAXED TO 912/257-7099
ASSURANCE PROPERTY MANAGEMENT
8412 ABERCORN STREET

TO BE COMPLETED BY EMPLOYER ONLY

Name of Employer: _____ Applicants Position: _____

Are you this applicant's direct supervisor? _____ Your Position: _____

EMPLOYMENT: Dates of Employment: From: _____ To: _____

Did this employee leave on good terms? Yes/No if no, then Why? _____

Were there any promotions or responsibilities added? _____

Would you rehire this employee? Yes/No (Please circle one) if NO, Why? _____

How much does/dis this employee make per Hour/Week/Month \$ _____

CURRENT EMPLOYEES: Do you foresee any wage increases? Yes/No Amount: _____

Do you foresee any changes in the work hours? Yes / No Amount: _____

Signature of employer Representative: _____ DATE: _____

Phone Number: _____

ASSURANCE PROPERTY MANAGEMENT
8412 ABERCORN ST.
SAVANNAH, GA. 31406
912/257-7088 OFFICE
912/257-7099 FAX

VERIFICATION OF RENTAL HISTORY

We are requesting verification of rental history for the individual(s) named below who state they are a present or former tenant.

Please complete the following information
and fax back to us as soon as possible.
Thank you for your cooperation.

I hereby authorize you to release
information regarding my tenancy to the
inquiring landlord

Cordially,
Janice Breeding
Property Manager

TENANT(S) SIGNATURE DATE

Rental history of: _____
Date moved in: _____ Moved out: _____ Amount of rent: \$ _____
Was rent paid on time? _____ Number of times late? _____ Any NSF Checks? _____
How many NSF Checks: _____ Number of Disposessory Warrants filed: _____
What was included in rent: _____
Number of people in family? _____ Adults: _____ Children: _____ Pets? _____
Did they follow rules? Yes _____ NO _____ Care of rental unit: _____
Any damage? (explain): _____
Complaints by others (explain): _____
Overall rating as a tenant (good, fair, poor): _____
If Poor poor please explain: _____
Would you rent to them again? Yes _____ No _____
Property notice given to vacate? Yes _____ No _____
Was full security deposit returned? Yes _____ No _____ If not why? _____

Persons providing information: _____

Title: _____ Phone number: _____