



Rental Verification
E-Fax : 1-928-438-9879

Date: _____

Fax To: _____

Real Estate Agent Requesting Info: Michele King (404)539-9879

Previous/Current Resident Name(s): _____

Current/Previous Resident Address: _____

Did this resident put in a proper notice to vacate? Yes ___ No ___

Lease Date(s): _____

How Long at this location? _____

Did this tenant or occupants cause damage to property? Yes ___ No ___

Would You Re-Lease to this Resident? Yes ___ No ___

If No Please Explain:

Has this Resident ever been filed (eviction) on? Yes ___ No ___

Does this Resident Owe Any Monies? Yes ___ No ___

If Yes How Much? _____

What was/is the rental rate: _____

Was Tenant ever Late? Yes ___ No ___

If yes How many Times: _____

Was this Tenant Evicted? Yes ___ No ___ If yes why: _____

**Please Fax Back to the number above or you may E-mail the information back to
MICHELE@SCOREPROPERTYMANAGEMENT.COM**

THANK YOU FOR YOUR PROMPT RESPONSE!

X _____

Person Filling out this form and Position