



305 Calais Drive Ste. B
Mesquite, NV. 89027
Office: 702-345-5100
Fax: 702-345-5111
Email: wall.teresa67@gmail.com

Part I. Applicant Information – To be completed by applicant

Name: _____

Current Address: _____

Telephone Cell: _____ Home: _____

Applicant Signature: _____

Part II. Landlord Verification – To be completed by Landlord / Property Mgmt.

The individual named above is applying for a home rental with Premier Property Management. Please verify the rental status for this individual. Please fill out and return document back to us by fax or email. Fax number and email is at top of sheet.

Move In: _____ Move Out: _____

Did the applicant pay his / her rent promptly?

Yes ___ No ___ Comments: _____

Did the applicant incur any cost for damages, late fees or other charges?

Yes ___ No ___ Comments: _____

Were any complaints made against the Tenant by any neighbors or anyone within the rental community?

Yes ___ No ___ Comments: _____

Were you given proper notice and reason for the rental/lease agreement being terminated?

Yes ___ No ___ Comments: _____

Were you able to return the tenants security, pet and/or cleaning deposits after he/she moved out?

Yes ___ No ___ Comments: _____

Would you consider leasing to this individual if he/she applied with you again?

Yes ___ No ___ Comments: _____

Landlord/ Property Managers Signature

Date



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Part I. Applicant Information – To be completed by applicant

Name: _____ Employment Number: _____
Employer: _____ Employer Phone : _____
Position / Title: _____
Telephone: Cell: _____ Home: _____
Applicants signature: _____

Part II. Employer Verification – To be completed by supervisor or personnel officer.

The individual named above is applying for a home rental with Premier Property Management. Please verify the employment status for this individual then send back to us by fax or email. Fax number and email are at top of sheet.

Name: _____ Position Title: _____
Salary / Per Hour: _____ Full / Part Time: _____
Employers Address: _____
Telephone: _____

Have any disciplinary actions been taken against this applicant by an immediate supervisor or by the Higher Authorities that would consider them for termination? ____ Yes ____ No

Comments: _____

Signature

Date



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