

LANDLORD REFERENCE FORM

	Name of Applicant	Applicant's Address		
Applicant's Signature		Landlord's Name/Management Company		
the i	ve applied for an apartment and stated that I rented from a formation requested below. I furthermore agree that act credit bureaus or local, state and federal law enformations.	t my signature a	uthorizes The Larchi	mont Estates to
	you a relative or friend of the applicant? If so, please describe t			
	Current landlord Previous Landlord	Other:		
Date	s of Applicant's tenancy: From:	To:		
Does	Applicant have a current lease? many persons occupy (occupied) the apartment?	Yes	No	
1.	Rent payment history a. Amount of monthly rent \$			
	b. Did the rental amount include utilities?	Yes	No	
	c. Does (did) applicant pay on time each month?	Yes	No No No	
	d. Has (had) he/she ever paid late? How many late payments?	Yes	No	
2.	Caring for unit/common area			
	a. Does (did) applicant keep the unit clean, and safe?	Yes	No No	
	b. Has (had) the applicant damaged the unit? If yes, please describe:	Yes	No	
	c. Will (did) you withhold any of the security deposit?	Yes Yes	No	
	d. Did the applicant have problems with insect/rodents?	Yes	No No	
	e. Did applicant, family, or guests damage any of the Common areas?	Yes	No	
	f. Have the applicant, family members or guests engaged in any criminal activity, including drug		140	
	related criminal activity in the unit or building? g. Has (had) the applicant, family member or guests acted in a physically violent and/or verbally abusive	Yes	No	
	manner towards neighbors, landlord or staff?	Yes	No	
	h. Would you re-rent to this applicant? If not, why?	Yes	No	
	PLEASE INCLUDE A COPY OF THE TENANT'S RE IS AVAILABLE. THANK YOU.	NTAL LEDGER	HISTORY IF ONE	
	Signature of landlord:	Date:		
	Daytime telephone number of the landlord:			

