



Screening Agreement

In consideration of the covenants herein contained, _____
(hereinafter-called **OWNER/AGENT/EMPLOYER**) and **North West Tenant Screening, LLC**, (hereinafter called **COMPANY**), agree as follows:

OWNER/AGENT/EMPLOYER employs **COMPANY** to provide **OWNER/AGENT/EMPLOYER** with information regarding applicant(s) or (prospective employees or current employees) for the property or Company listed below: (Include a Property Tax Statement or Escrow documentation, for more than one property please attach additional property address and a property tax statement or escrow documentation for each.)

Address _____ City _____ State _____

Company _____ Business License _____ State _____

I - TERM: The primary term of this Screening Agreement begins on, _____, and ends on _____.
(Usually one year term) **Setup fee \$35.00.**

II - RENEWAL AND EXPIRATION: Upon the expiration of the primary term of this Screening Agreement, this Screening Agreement will automatically be renewed for a like period of time.

III - TERMINATION: 30-Day Notice Not Required. This Screening Agreement will automatically renew for a like period of time unless terminated as listed below.

Immediate Termination: **COMPANY** may terminate this Screening Agreement immediately for the following reasons: **OWNER/AGENTS'S** breach of contract, or the failure or inability to follow **COMPANY'S** interpretation of Landlord/Tenant law or any State or Federal Law that in **COMPANY'S** opinion that affects **COMPANY'S** ability to professionally perform it's duties in this Screening Agreement.

IV - COMPENSATION TO COMPANY: **OWNER/AGENT/EMPLOYER** agrees to promptly pay for all services at the time requested.

OWNER/AGENT/EMPLOYER agrees that prices may change without notice at any time.

V- COMPANY RESPONSIBILITIES: **OWNER/AGENT/EMPLOYER** authorizes **COMPANY** with the authority to perform all lawful actions necessary for the accomplishment of this Screening Agreement including:

1. Screening prospective tenants, potential employees or employees, using standard Rental Applications or Employment authorization form or an Employment application. * * Note all Reports are the property of **NorthWest Tenant Screening, LLC**. To protect all parties from the serious potential of Identity Theft, all reports are secured at our office and can not be released to **OWNER/AGENT/EMPLOYER** or **Applicant**. **COMPANY** may discuss Reports with **OWNER/AGENT/EMPLOYER** only, to assist **OWNER/AGENT/EMPLOYER** in understanding the information contained.

2. Make reasonable efforts to obtain prospective tenants', employees' credit report, criminal report, employment and/or rental history as requested and to report findings to **OWNER/AGENT/EMPLOYER**.

SCREENING Price Guideline

Credit Report Only	\$15.00	National Criminal Report Only	\$50.00
Statewide – Criminal Report	\$35.00		
Statewide - Package Credit & Criminal Report	\$45.00	Nationwide - Package Credit and Criminal Report	\$65.00
Statewide – Package Full Tenant Screening Credit, Criminal, Employment, Rental History	\$85.00	Nationwide - Package Full Tenant Screening Credit, Criminal, Employment, Rental History	\$125.00

EMPLOYMENT - Background Price Guideline

National Criminal Report – All Offenses Including Nationwide Violent & Sex Offender Search	\$65.00
National Credit & Criminal Report – Including Nationwide Violent & Sex Offender Search	\$75.00

ALL CRIMINAL BACKGROUND CHECKS STATE OR NATIONAL INCLUDE; ALL OFFENSES NATIONWIDE VIOLENT AND SEX OFFENDER SEARCH.

VI. OWNER / EMPLOYER RESPONSIBILITIES:

1. **OWNER/AGENT/EMPLOYER** agrees to provide proof of Ownership, Management Agreement or Business.
2. **OWNER/AGENT/EMPLOYER** certifies he/she has a legal permissible reason for the request for information.
3. **OWNER/AGENT/EMPLOYER** authorizes **COMPANY** to keep all records for six (6) years.
4. **OWNER/AGENT/EMPLOYER** will complete a **Report Request Form** on each applicant and will submit the Form and the Complete Application for processing.

OWNER/AGENT/EMPLOYER Name _____

OWNER/AGENT/EMPLOYER Signature _____ Date _____

OWNER/AGENT/EMPLOYER Name _____

OWNER/AGENT/EMPLOYER Signature _____ Date _____

Address _____ City _____ State _____

Phone _____ Cell _____ Fax _____

Email (Required) _____

Visa ___ MC ___ Account # _____ Exp. Date _____ CV _____

NorthWest Tenant Screening, LLC

Date

Office Use Only: OWNER/AGENT Property Tax Account # _____ State: _____