

DATE:		
NAME(S):		
ADDRESS:		
RENTAL PAYMENT :		
A: Is (was) applicant current on rent?		
B: Amount paid per month:		
C: Has (had) he/she ever been late?	How often?	Late Fee?
D: Have (had) you ever begun eviction p		
E: Have (had) he/she had check MANY?	s returned for non-sufficient	t funds?HOW
CARING FOR UNIT:		
A: Does (did) the applicant keep unit cle	ean?	
B: Has (had) applicant damaged unit?		
C: Has (had) applicant paid for damages	· · · · · · · · · · · · · · · · · · ·	
D: Will you (did you) keep any part of the	ne security deposit?	
CENEDAL INCODMATION.		
GENERAL INFORMATION:		
A: Length of residency?B: Expiration of current lease?	If the lease is not expirin	g when will the tenent's
		g, when will the tenant's
C: Have (had) there been any complaints	s about the tenant?	
explain	s about the tenant:	II 50, picuse
D: Has (had) the applicant given you any	v false information?	
E: Would you rent to this tenant again?		
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DATE	SIGNATURE	
PHONE NUMBER	TITLE	
The information above will be held in co. Any statements on your part, as to the and are given as such and solely as a ma. Your prompt completion and return of the	responsibility or standing of any atter of courtesy and for which no	person, are a matter of opinion
925 7 th North Street, Office Liverpoo	**	: 315.457.0728 pdm-llc.com