



Applicant Screening Authorization Form

Access Code _____

Applicant Information

Last Name	First Name	M.I.
Date of Birth	Social Security Number	
Current Street Address		
City	State	Zip Code

Applicant Signature(s)

By signing below, I/we authorize that the above information is correct and complete and hereby authorize Landlord to obtain information it deems desirable in the processing of my application, including; credit reports, civil or criminal actions, rental history, employment/salary details, police and vehicle records, and any other relevant information. If I rent the unit, I understand the information on this form may be maintained in a tenant database for up to 7 (seven) years after I vacate the premises.

Applicant: _____ Date: _____

Co-Applicant: _____ Date: _____