

Rental property address: _____

ALL READY PROPERTY MANAGEMENT REALTY, INC
10524 SANFORD STREET, RIVERVIEW, FL 33578
Phone (813) 741-3790 Fax (813) 741-3791

Date:
To:

Residence Verification Reference

For Rental Purposes Only - **MUST BE FILLED OUT BY PRESENT LANDLORD**

_____ has stated they are now living in your residence at:

_____ Yes _____ No (if yes, how long) _____

Move-In Date _____ Lease Expiration Date _____

Monthly Rent Total \$ _____ Move Out Date _____

Paid on Time _____ # of NSF: _____

of Occupants _____ Pets: Dog, Cat, Other _____

Sufficient Notice Given: _____ Skip/Eviction: _____

Any Damages: _____

Any Lease Violations? _____

Would You Re-rent? _____ Left Owing Money? _____

Name / Signature: _____ Phone #: _____

Thank you for your time, I greatly appreciate your help.

Maria Elena D'Amico, Realtor / Property Manager
All Ready Property Management Realty Inc. 813/230-4091

THE UNDERSIGNED REPRESENTS THAT ALL FACTS AND STATEMENTS PRESENTED HEREIN ARE TRUE AND FOR THE PURPOSE OF OBTAINING A RESIDENCE VERIFICATION REPORT. VERIFICATION MAY BE OBTAINED FROM ANY SOURCE NAMED IN THE UNDERSIGNED'S APPLICATION OR A RECOGNIZED CREDIT REPORTING SERVICE. THE DECISION TO GRANT OR DENY THIS APPLICATION IS AT THE SOLE DISCRETION OF THE AGENT/LANDLORD/LENDER.

APPLICANT SIGNATURE _____ DATE _____

CO-APPLICANT SIGNATURE _____ DATE _____

CO-APPLICANT SIGNATURE _____ DATE _____