

Lillian Smith Property Management
P.O. Box 743
Cary, N.C. 27512
Fax: (919) 882-8155

Rental Verification Request

To: _____
Company: _____
Fax #: _____

From: Lillian Smith
Lillian Smith Property Management
Date: _____

We have received an application for rent from the person(s) listed below. Please provide the following information and fax back to us at (919)-468-1115 as soon as possible. Thank you in advance for the cooperation.

Name: _____
Address: _____
Rental amount: _____ Date of occupancy: _____ to _____
Did tenant pay rent on time? _____ Late Payments if any? _____
Did tenant have NSF checks? _____ Any lease violations? _____
Did the tenant have a pet and were there any damages from the pet? _____
Brief description of above answers: _____
How did the tenants leave the property? _____
Is there a balance due from the tenant? _____
Would you rent the tenant again? _____

Authorized Signature: _____ Title: _____
Date: _____

I/we authorize Lillian Smith Property Management to make inquires, pull credit checks, and verifies rental, employment and /or criminal histories, now and in the future to verify the statements above.

Applicants Signature Date

Applicant's signature Date