



RENTAL VERIFICATION FORM

(Applicant, only fill out your name, address, and sign)

Name: _____

Current Address: _____

Property Manager or Landlord's name: _____

Lease Start Date _____

Lease End Date _____

Amount of Rent _____

Any NSF's? _____ Late payments? _____ How many? _____

Where there any Eviction Filings? _____

If so, how many times in the last 12 months? _____

Has the tenant given you a 30-day notice? _____

Would you re-rent to this tenant? _____

Did the tenant leave the property in good condition? _____

Any other comments? _____

☐ I acknowledge and authorize CD Property Management of NC, LLC to contact and verify my current and/ or previous landlord for residency information. Any information obtained will be used for the processing of my application. I further acknowledge that the information provided by me is accurate and true.

Applicant signature _____ Date _____