

## **Landlord Reference Form**

Having applied for an apartment, I give permission for the leasing and management office to verify all previous landlords provided herein.

| Current or Previous Landlord    | :   |
|---------------------------------|---|
| Phone number:                   | Your Address/Unit:                            |
| Dates of Occupancy:             |   |
| Monthly Rent:                   |   |
|                                 |   |
| Applicant Name                  | Signature                                     |
| *********                       | ****************                              |
| Landlord Please (               | Complete This Portion and Fax to 508-946-1140 |
| What was the monthly rent:_     |   |
| When does/did the lease expir   | re:   |
| Is/was the account paid satisfa | actorily:                                     |
| Have there been any payment     | s more than 10 days late?                     |
| Has this tenant ever received   | a 14 day notice?                              |
| Is the rent in arrears?         |   |
| Any other comments:             |   |
|                                 |   |
|                                 |   |
|                                 |   |
| Completed By:                   |   |
|                                 |   |
|                                 | Title:  |
| Signature                       |   |