

RENTAL VERIFICATION FORM

Landlord Release of Information

Please fax back to (425) 226-8736 or email to theaviatorapts@pinnaclefamily.com

| | |
|--|------------|
| Name of Applicant: _____ | |
| Rental Address: _____ | |
| I, the above named, hereby give The Aviator Apartments permission to communicate with my current and former landlord or property manager for the purpose of discussing any and all of the facts and circumstances of my current or former tenancy, as well as the other information listed on my application with are no limitations or restrictions regarding what may be discussed or revealed to The Aviator Apartments . Please provide the below information to The Aviator Apartments at your earliest convenience. | |
| Applicant Signature _____ | Date _____ |

| | | |
|------------------------------|---------|-----|
| Landlord Information: | | |
| Property Name | Address | |
| Landlord Name | Phone | Fax |
| Landlord Email _____ | | |

| | | |
|---------------------------------|------------------------|-----------------------------|
| Applicant Information: | | |
| \$ | | |
| Monthly Rent | Move In Date | If Current, Lease End Date |
| If Past, Move Out Date | Proper notice given? | Would re-rent to applicant? |
| If balance owing, how much? | # of Late Payments | # of NSF's |
| Any notices served to resident? | If so, please describe | |

Thank you,

The Aviator Apartments
(425) 226-8710