



Authorization To Release Confidential Information

The undersigned authorize Resident Research, LLC, the landlord or any of its agents to obtain and investigative any consumer/commercial investigative reports requested. This will include but not be limited to credit history, criminal record history, eviction record history, and a sex offender registry search in conjunction with my lease application at a property under their management/ownership.

Furthermore, I authorize the release of information from all current and/or previous landlords, employers, trade references, vendors and/or bank representatives. This investigation is for the purpose of evaluating my worthiness of tenancy and all information that is compiled in this background investigation is strictly confidential and will not be shared with any other party.

I hereby hold my current and former Employers, Trade References, Vendors, Landlords, Resident Research, LLC, Landlord or any of its agents free and harmless of any liability for any damages arising out of any improper use of this information.

I understand that tenancy can be denied if any information within my application is found to be false or misrepresented in any way. If any items are found to be untrue after lease commencement I understand that my lease may be immediately terminated and I will be asked to vacate the property immediately.

COMPANY INFORMATION				
COMPANY NAME:		BUSINESS PHONE:		
FEDERAL TAX ID #	DATE ESTABLISHED:	DUNS # (IF APPLICABLE)		
PHYSICAL ADDRESS:		CITY:	STATE:	ZIP CODE:
MAILING ADDRESS:		CITY:	STATE:	ZIP CODE:
APPLICANT/OFFICER INFORMATION				
FIRST NAME:	MIDDLE NAME:	LAST NAME:		
DATE OF BIRTH:	SOCIAL SECURITY #:	DRIVERS LICENSE # / STATE		
HOME ADDRESS:		CITY:	STATE:	ZIP CODE:
APPLICANT/OFFICER INFORMATION				
FIRST NAME:	MIDDLE NAME:	LAST NAME:		
DATE OF BIRTH:	SOCIAL SECURITY #:	DRIVERS LICENSE # / STATE		
HOME ADDRESS:		CITY:	STATE:	ZIP CODE:
SIGNATURE				
SIGNATURE:		PRINTED NAME:	DATE:	
SIGNATURE:		PRINTED NAME:	DATE:	