

HISTORY (__ current __ previous)

Residents Name: _____

Property Name: _____

Address: _____

Rent Amount ? _____

Move - In Date ? _____

Move - Out Date ? _____

Proper Notice Given? _____

Lease Agreement Fulfilled? _____

Late Payments? _____ If so, how many? _____

Nsf's? _____ If so, how many? _____

Lease Violations? _____ If so, how many? _____

Damages? _____

Deposit Refunded? _____

Pets (Cat? / Dog?) _____

If dog, what breed? _____

Would you lease to them again? _____

What is the existing balance? _____

Outstanding balance? _____

Completed by: _____

Company Name: _____

Office Phone #: _____

Email Address: _____