

Tenant Credit Check Authorization Form

Please complete all requested information below. This form authorizes the landlord or property management company to conduct a credit check and background check.

1. Applicant Information

Full Name:

Social Security Number (SSN):

Date of Birth (MM/DD/YYYY):

Phone Number:

Email Address:

2. Residential History

Current Address:

City, State, Zip Code:

How long have you lived at this address?:

Current Landlord Name:

Current Landlord Phone Number:

3. Authorization and Consent

By signing below, I hereby authorize the Landlord/Property Manager listed below to obtain a consumer credit report, background check, and criminal history check in connection with my application for tenancy. I understand that this information will be used solely for the purpose of evaluating my qualification as a tenant.

I certify that the information provided on this form is true, accurate, and complete to the best of my knowledge.

Landlord/Property Management Company Name:

Rental Property Address Applied For:

Applicant Signature (Sign after printing):

Date of Signature: