

Eviction History Authorization Form

Please complete all fields below to authorize a search of your eviction history.

Applicant Information

Full Name:

Date of Birth:

Social Security Number:

Phone Number:

Email Address:

Current Address

Street Address:

City:

State:

Zip Code:

Previous Address (If at current address for less than 3 years)

Street Address:

City:

State:

Zip Code:

Authorization Statement

I hereby authorize the landlord, property manager, or designated screening agency to conduct an investigation into my eviction history, court records, and rental history. I understand that this information will be used solely for the purpose of evaluating my rental application. I release all parties from any liability for disclosing this information.

Acknowledgment and Signature

Applicant Printed Name:

Applicant Signature (Sign upon printing):

Date: