



I/We \_\_\_\_\_ and/or \_\_\_\_\_ authorize  
(Signed Applicant 1) Date (Signed Applicant 2) Date

Promax Management, Inc. to process Residency Verification.

**Request for Residency Verification**

The individual(s) listed below are applying for a rental property through us. You were listed as having rented to them. Your comments, recommendations and all information provided regarding the rental history will be appreciated. Please be advised, when issuing an approval or a denial decision, we do not disclose any information to our applicant(s) as to who provided the information or what the information entails. We know this is a lot of information to provide, however we cannot render a valid decision unless we know how this applicant(s) was as a resident of yours. Thank you.

Requested By: \_\_\_\_\_

Resident's Name: \_\_\_\_\_

Occupancy Address: \_\_\_\_\_

Move In Date: \_\_\_\_\_ Move Out Date: \_\_\_\_\_ Was Proper Notice Provided: \_\_\_\_\_

Management Notice or Payer/Quit Ever Given: \_\_\_\_\_ Over Occupancy Concern: \_\_\_\_\_

Monthly Rent Amount: \_\_\_\_\_ How Many Late(s) or NSF During Tenancy: \_\_\_\_\_

Balance Remaining and How Much: \_\_\_\_\_ If So, What For: \_\_\_\_\_

Court Action Taken: \_\_\_\_\_ House Keeping Habits: \_\_\_\_\_

Damage Charges Before or After Moving Out: \_\_\_\_\_ Explain: \_\_\_\_\_

Would you rent to this applicant(s) again: \_\_\_\_\_ If No, Why Not: \_\_\_\_\_

Additional Information: \_\_\_\_\_

Name of Person Providing Information: \_\_\_\_\_ Title: \_\_\_\_\_