APPLICANT: Please sign the LAST LINE ONLY!

RENTA	AL HISTORY VERIFICATION FORM
application for a property managed by Legacy meeting financial obligations. We also need to or eviction notices. The information that we asl evaluating the applicant's rental application. As consented to the release of the information we	resides/resided at has made an Properties. It is important that we determine the applicant's rental history of determine whether the applicant has a record of non-financial lease violations k you to supply will be kept confidential and used only for the purpose of indicated by the signature at the end of the form, the applicant has request. We request that this information should be supplied within 24 applicant. Your prompt cooperation is greatly appreciated!
Thank you,	**Upon completion of this form, please fax to Legacy Properties at 406.577.1470
Dote	or email it to info@bozemanlegacy.com
Legacy Properties Date	
Phone & Fax: 406.577.1470	
Rental History:	
1. Are you related to the applicant?	Y/N
2. Did the applicant have a lease?	Y / N
If yes, what was the length of	
3. What is/was the monthly rent?	
4. Did the applicant pay on time? Y / N	
If applicant paid late, how often	
5. Did you ever receive a NSF check f	
6. Did the applicant keep the unit clear	• •
7. Any damages beyond normal wear	
8. Did you ever begin eviction proceed	
9. Does the applicant still owe you mo	
If yes, how much?	•
10. Did you keep any of the applicant's	
If yes, how much and why?	
•	noise disturbances, disruptions or complaints? Y / N
If yes, describe	
12. Did the applicant ever have any pe	ets in the apartment?Y / N
If yes, did the pet damage the	property? Y / N
13. Did the applicant give you proper notice before moving? Y / N	
14. Would you rent to this applicant ag	gain? Y/N
Additional comments are appreciated:	
Information provided & verified by:	
Name (please print) Company:	
Company.	· <u></u>
Signature:	Date:
RESIDENT RELEASE:	
By my signature below, I hereby authorize the release of information requested on this application to Legacy Properties.	

APPLICANT SIGNATURE: _____ Date: _____