



Verification Authorization Form



Project Name:		Applicant/Tenant:			
Project Address:		Application ID:			
City:		State:		Zip:	
Office Number:		Property Email:			

To: Whom It May Concern

RE: Verification Authorization Form

I hereby authorize the Manager of the apartment complex listed above to verify any or all of my income, employment, criminal, landlord or personal references necessary to determine my eligibility for residency in the above government-financed project.

I further understand that requested information is only for the purpose of determining the eligibility of my household and will not be used for any other purpose.

There by authorize my employer, landlord (past and present), bank or other financial institution, or other income source or personal reference to release the requested information.

I hereby authorize all persons or entities listed herein above to release any information in their possession known to them, concerning me. A copy of this application shall serve as the authority for the release of any of said information. I further authorize VeriRent, Inc., its employees and agents to make such inquiries as maybe deemed necessary for action and determination upon this application.

Has any applicant been convicted of any criminal offense? YES NO

If yes, who and explain _____

A photo static copy shall be considered equivalent to an original signature.

(Signature of Applicant)

SocialSecurity#

(PrintName)

Date of Birth

Address _____ City _____ State _____ Zip _____

Home # _____

Cell # _____

WARNING: Section 1001 of Title 18 of the U.S. Code makes it a criminal offense to make willfully statements or misrepresentations to any Department or Agency of the United States as to any matter within its jurisdiction.