

Tiger Properties, LLC

387 College Ave.
Clemson, SC 29631
Office: 864-654-RENT
Fax: 864-653-9115

LANDLORD VERIFICATION

Dear Sir/Madam:

We are writing in reference to a former/present resident of yours who has recently applied for an apartment through our offices. We would appreciate your cooperation in completing this form at your earliest convenience. Please mail to the address or fax to the number listed above.

Sincerely,

Leasing Consultant

I hereby authorize the release of the following information, concerning my housing , to Tiger Properties, LLC.

Applicant's Signature

To Be Completed by Applicant

Resident Name: _____ Address: _____
Contact Person: _____ Phone No.: _____
Leased From: _____ To: _____

To Be Completed by Landlord Only

Occupancy Dates From: _____ To: _____ Monthly Rent \$ _____

Payment Habits: PROMPT
 FAIR – no more than 30 days late
 POOR – more than 30 days late
 If poor, balance owed \$ _____

Did resident maintain premises well? _____

Were there excessive noise complaints about resident? _____

Were there complaints about resident? _____

Did resident complete occupancy agreement and fulfill terms of lease? _____

Was this resident evicted? Yes No

Would you re-rent to this resident? Yes No If no, why? _____

Signature

Date