



Landlord Reference Form

Having applied for an apartment, I give permission for the leasing and management office to verify all previous landlords provided herein.

Current or Previous Landlord: _____

Phone number: _____ Your Address/Unit: _____

Dates of Occupancy: _____

Monthly Rent: _____

Applicant Name

Signature

Landlord Please Complete This Portion and Fax to 508-946-1140

What was the monthly rent: _____

When does/did the lease expire: _____

Is/was the account paid satisfactorily: _____

Have there been any payments more than 10 days late? _____

Has this tenant ever received a 14 day notice? _____

Is the rent in arrears? _____

Any other comments: _____

Completed By: _____

Title: _____

Signature