Woodside Apartments

250 Hampton Circle
Rochester, MI 48307
(248) 852-9598 / Fax (248) 852-8115

CREDIT AND REFERENCE AUTHORIZATION

LEASEHOLDER CREDIT

LAST NAME _____ FIRST NAME _____ INITIAL _____

HOUSE # _____ STREET NAME _____ STATE _____ ZIP CODE _____

SOCIAL SECURITY NUMBER _____

SPOUSE: _____ FULL NAME _____ SOCIAL SECURITY NUMBER

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LEASEHOLDER EMPLOYMENT VERIFICATION

Date Received: _____ Source: _____ Length: _____

Confirmed By: _____ Wage Verification: _____

Additional Comments: _____

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LEASEHOLDER LANDLORD REFERENCE

Date Verified: _____ Person Verified With: _____

Length: _____ Rental Rate: _____ Would Rent To Again: _____

Additional Comments _____

_____

I/WE UNDERSTAND THAT FRANKEL MANAGEMENT WILL REVIEW MY/OUR PERSONAL CREDIT, LANDLORD REFERENCE, AND EMPLOYMENT HISTORY AS WELL AS MY/OUR RENTAL APPLICATION.

_____ _____

APPLICANT(S) SIGNATURE DATE

_____ _____

MANAGER SIGNATURE DATE