

# SAFESCREENER.COM

BACKGROUND SCREENING MADE SIMPLE.

Background Screening Consultants LLC  
650 W Lake St, Suite 310  
Chicago, IL 60661



**Applicant/TENANT Background Check Release.** (PLEASE NOTE: This Is NOT a lease application)

First Name		Middle	Last Name (Include hyphenated names)	
Social Security Number	Date of Birth	Driver's License / State ID #		State of Issuance
Contact Email Address		Contact Phone Number		
<b>Current Address</b>				
Street		City	State	Zip Code
<b>Previous Address</b>				
Street		City	State	Zip Code

Please check this box if you want a free copy of the report requested (CA, MN, OK residents ONLY).

## AUTHORIZATION

I hereby consent and authorize Background Screening Consultants, LLC to secure information pertaining to my character and background for the purpose of a tenant background check. I understand that the information supplied by me can be utilized in determining my eligibility for renting property. This background investigation may include research involving; a criminal record search through county, state, federal jurisdictions as well as proprietary databases and international sources, a social security number verification and residential history trace, driving record history, current employment and salary verification, national security watch lists, public databases and internet archive research, as well as the confirmation of any information supplied by me on this background authorization form or any leasing application form. I understand that these reports may be obtained at any time after receipt of my authorization and throughout my time of residence. I release from liability any and all persons, companies, and corporations that supply information regarding my history as a result of this background investigation. I understand that any information discovered may be done so through onsite public research, electronic databases, and oral interviews. I further release and indemnify Background Screening Consultants LLC against any liability related to this background investigation.

\_\_\_\_\_  
Signature (Please print document and sign)

\_\_\_\_\_  
Today's Date

**Please return this form directly to the potential landlord or management office.**

www.SafeScreener.com  
888.578.8600 Phone  
888.548.0421 Fax