

Victorian Village

Apartments

39 Trammell St. Marietta, Ga 30064

Phone: 404-512-5839

Email: Managercliftonridge@gmail.com

To: _____ Date: _____
(Name of Landlord or Agency)

RE: _____ Phone: _____

Address: _____ Fax: _____

Person(s) named above have applied for an apartment at Clifton Ridge Townhomes. Please fill in the following information so we may verify their previous/present rental history information. Thank you for your assistance.

Management Agent

I hereby authorize Clifton Ridge Townhomes to make inquiries regarding my residency for the purpose of determining my eligibility for residency.

Applicant Signature

Date

Lease Began: _____ Move out or lease end date: _____

Proper Notice Given: Yes No Number of occupants: _____ Pets: _____

Monthly Rental Amount: _____ Security Deposit Amount: _____

Was rent paid on time: Yes No # of late payments: _____ # of NSF's _____

Dispo/Eviction Filed: Yes No If yes, how many: _____

Balance Due at this time: _____ Indicate amount due: _____

Would You lease to them again: Yes No If no, explain: _____

Any Lease Violations: Yes No If yes, explain: _____

Comments: _____

Manager or Agent Signature

Title

Date