

Greetings!

Congratulations on your search for a new home! What an exciting time!! (If you're new to Ocala, we'd like to welcome you to the family! If you are already living in Ocala, we'd like to extend a warm hello!)

Attached, kindly find the forms you will need to complete in order to expedite your Residential Background Check.

Kindly note that the Residential Background Check spans 7 years and includes the following:

Social Security Trace
County Criminal
Multi-Jurisdictional Criminal
National Sex Offender
Eviction
Foreclosure

The cost of your Residential Background Check is \$55.00 plus court costs and the quantity of legal names you have had in the last 7 years. Being that everyone's residential history and quantity of legal names vary, we will contact you with the total cost of your background check prior to processing.

Please feel free to contact Melby at 352.291.1155 or reply to this email.

Thank you and your affiliates for allowing Accurate Background Check, Inc. to gain your confidence and trust!!

Respectfully,

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Accurate Background Check, Inc.
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Ocala, FL 34471
352.291.1155

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ALWAYS STRIVE FOR EXCELLENCE!

The information transmitted (including attachments) is covered by the Electronic Communications Privacy Act, 18 U.S.C. 2510-2521, is intended only for the person(s) or entity/entities to which it is addressed and may contain confidential and/or privileged material. Any review, re-transmission, dissemination or other use of, taking of any action in reliance upon, this information by persons or entities other than the intended recipient(s) is prohibited. If you received this in error, please contact the sender and delete the material from any computer

TENANT SCREEN FORM

Candidate Information

Please Print Clearly – Please return to Orders@BKChecks.com or via fax 352.854.8917

Name _____
First Middle Name Last (Maiden)

Print All Former Names Used (1) _____ (2) _____

Social Security Number: _____ - _____ - _____ Sex _____ Race _____

Date of Birth: ____/____/____ Phone Number _____

Current Street Address: _____ City: _____ State: _____ Zip: _____

Driver's License Number: _____ State of Issuance: _____

Email Address: _____

Print Residences in the previous 7 years to include City & State:

(1) Address: _____ City / State: _____ Zip: _____ From: _____ To: _____

(2) Address: _____ City / State: _____ Zip: _____ From: _____ To: _____

(3) Address: _____ City / State: _____ Zip: _____ From: _____ To: _____

1. Have you ever been convicted of any crime or offense? Yes No

2. Have you ever been involved in a Civil Action as the Plaintiff or Defendant? Yes No

3. Have you ever been evicted or a defendant in a case for non-payment? Yes No

3a. If so: County _____ State _____ Year _____

4. Have you ever been a defendant in a foreclosure? Yes No

4a. If so: County _____ State _____ Year _____

If you answered Yes to Numbers 1, 2, or 3 provide the Case Numbers, Date of Action, City & State, Disposition and Status below:

Please explain. If more space is needed, please use the back of this form to continue explanation:

By signing below, you are certifying that the above information is true and correct:

Signature: _____ Print: _____ Date: ____/____/____



Authorization for Credit Card Use

PRINT AND COMPLETE THIS AUTHORIZATION AND RETURN TO:
Orders@BKChecks.com

Name on Card: _____

Billing Address: _____

Credit Card Type: VISA MASTERCARD AMERICAN EXPRESS OTHER

Credit Card #: _____

Expiration Date: _____ Security Code: _____ (3 digits back of card / 4 digits front if AMEX)

Amount to be charged: _____ (USD)

Reason for charge: (Pls list Invoice#(s) and or Applicant Names)

- Invoice(s)# _____
- Livescan Fingerprinting _____
- Tenant Screen _____
- Background Check Package _____
- Drug Testing _____
- DNA Testing _____
- Private Investigation _____
- Mitigation (Death Penalty Case) _____
- Other _____

I authorize ACCURATE BACKGROUND CHECK, INC to charge the amount listed above to the credit card provided herein. I agree to pay for this charge in accordance with the issuing bank's cardholder agreement. I understand that this payment is NON-REFUNDABLE. By signing this document, I authorize ACCURATE BACKGROUND CHECK, INC to charge my credit card pursuant to above information.

Date: _____

Cardholder Signature: _____

Cardholder Name (Type): _____