**JACKSON REAL ESTATE, LLC**

**415 Market Street; Suffolk, Virginia 23434**

**Phone: (757) 539-8011 Fax: (757) 539-8082**

**RENTAL VERIFICATION**

**FILL OUT ONLY HIGHLIGHTED AREA AND RETURN TO JACKSON REAL ESTATE**

RENTAL AGENCY & CONTACT NAME: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

RENTAL AGENCY PHONE/ FAX NUMBER: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

RENTAL EMAIL ADDRESS: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

YOUR NAME & PREVIOUS ADDRESS: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

The individual(s) referenced above has made an application to Jackson Real Estate, LLC for a rental property.

The applicant(s) consents to the release of information pertaining to his/her rental history while residing at the aforesaid address. We would appreciate your cooperation in completing the information requested below and returning it to us via fax (757) 539-8082.

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_, 20\_\_\_\_\_

APPLICANT #1 SIGNATURE DATE

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_, 20\_\_\_\_\_

APPLICANT #2 SIGNATURE DATE

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_, 20\_\_\_\_\_

JACKSON PROPERTIES – AUTHORIZED REPRESENTATIVE DATE

TENANT- DO NOT WRITE BELOW THIS LINE!!!

Rented from: \_\_\_\_\_\_\_\_\_\_\_\_\_\_ To: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ MONTHLY RENT: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Rent payments made on time: Satisfactory Unsatisfactory Number of late payments \_\_\_\_\_\_

Number of total occupants in the property \_\_\_\_\_\_\_\_ NUMBER BEDROOMS \_\_\_\_\_\_\_ BATHROOMS \_\_\_\_\_\_

Was the Lease obligation fulfilled? ……………………………... YES NO

Was there a Lease break? ……………………………… YES NO

Was adequate notice given? ……………………………………. YES NO

Were eviction proceedings initiated? ………………………………….. YES NO

Is there an outstanding balance on the account? ……………………. YES NO

Would you re-rent to the applicant? ……………………………………. YES NO

Did the tenant own dog/cat, etc.?................................................... YES NO

What is your time frame for notice to vacate?................................. 30 days 60 days’ notice

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_, 20\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Authorized Representative Date Company Telephone