

**DAVENPORT POLICE DEPARTMENT LANDLORD BACKGROUND CHECK**

Name: \_\_\_\_\_  
Last First Middle Initial

Social Security #: \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_ D.O.B. \_\_\_\_/\_\_\_\_/\_\_\_\_

Phone: \_\_\_\_\_ Alternate Phone: \_\_\_\_\_  
*or Email Address*

Current Address: \_\_\_\_\_  
Street # City State Zipcode  
Rent: [ ] Own: [ ] Living with Family Member: [ ]

If Renting, Name of Current Landlord: \_\_\_\_\_ Phone: \_\_\_\_\_

List all aliases: \_\_\_\_\_

List any co-applicants: \_\_\_\_\_

List any children who will be living in the household.

Child 1: \_\_\_\_\_ Child 2: \_\_\_\_\_ Child 3: \_\_\_\_\_  
D.O.B.: \_\_\_\_\_ D.O.B.: \_\_\_\_\_ D.O.B.: \_\_\_\_\_

Child 4: \_\_\_\_\_ Child 5: \_\_\_\_\_ Child 6: \_\_\_\_\_  
D.O.B.: \_\_\_\_\_ D.O.B.: \_\_\_\_\_ D.O.B.: \_\_\_\_\_

Current Employer: \_\_\_\_\_  
Address: \_\_\_\_\_ Phone: \_\_\_\_\_  
Street # City State Zipcode

Please list any additional information you feel is relevant: Criminal/Evictions/Bad Credit/Car Info/DL#

**I authorize the release and verification of all information needed to complete a full background report including criminal and consumer credit report.**

\_\_\_\_\_  
Applicant (Print Name) Date

\_\_\_\_\_  
Applicant (Signature) Date.

**NOTE: \*\*\* All fields must be completed in full or request will not be processed.\*\*\***

**This information is being provided at the request of Landlord and Landlord agrees that the decision to rent is the Landlord's SOLE decision. The city of Davenport is not an agent of Landlord nor does it guarantee or warrant the character or suitability of a tenant. The city is simply providing information requested.**

Geno \_\_\_\_\_  
Property Agent Date  
Schricker Apartments \_\_\_\_\_  
Name of Property  
411 W 4th Street, Davenport IA 52801 \_\_\_\_\_  
Property Address  
319-572-7468 \_\_\_\_\_ dellapts@hotmail.com \_\_\_\_\_  
Phone # Fax #

**Please return to the Crime Prevention Unit, Davenport Police Department Fax# 563-888-2081.**