

Request for Residency Information

Community: _____ Telephone: _____

Address: _____

Street

City

State

Zip

Dear Landlord:

The Chesapeake Redevelopment and Housing Authority requires all applicants applying for affordable housing to have certain information verified. An applicant has listed you as a current or previous landlord. The applicant's signature below is authorizing you to provide information regarding their tenancy. Thank you for your prompt response.

Sincerely,

Landlord/Manager Date Telephone No.: 673-6719 FAX: 673-6721

Applicant Name: _____

Address: _____

City/State/Zip: _____ S.S. #: _____

I hereby give permission to release the below information to the CRHA.

Signature: _____ Date: _____

RENTAL REFERENCE

Amount of rent: _____ Date tenant moved in: _____

Do you have a lease with this tenant? ___ Yes ___ No Expires on: _____

Do you receive any type of rental subsidy for this tenant? ___ Yes ___ No

Did they ever pay their rent late? ___ Yes ___ No _____

If yes, how many times during the past 12 months? _____

Do they have a past due balance? ___ Yes ___ No

If yes, amount Due: \$ _____

Have they attempted to pay the balance? ___ Yes ___ No

Housekeeping: ___ Excellent ___ Good ___ Poor

If poor, please explain: _____

Did you request them to vacate? ___ No ___ Yes

If yes, please explain: _____

If former resident, was condition of vacated unit and property: ___ Excellent ___ Good ___ Poor.

If left in poor condition, please explain: _____

Would you rent to this resident again? ___ Yes ___ No

Name and title of person verifying this information:

Signature Title Phone Date

