

CREDIT REPORTING

APPLICANT AUTHORIZATION AND CONSENT FOR RELEASE OF INFORMATION

BY SIGNING BELOW, I AUTHORIZE SWENSON OAKS APARTMENTS TO DO AN INVESTIGATIVE REPORT ON MYSELF. I AUTHORIZE AND UNDERSTAND THAT INVESTIGATIVE BACKGROUND INQUIRIES WILL BE MADE ON MYSELF REGARDING CONSUMER CREDIT, EVICTIONS, CRIMINAL BACKGROUND AND OTHER REPORTS. FURTHERMORE, I UNDERSTAND THAT YOU WILL BE REQUESTING THIS INFORMATION FROM VARIOUS FEDERAL, STATE AND OTHER AGENCIES WHICH MAINTAIN RECORDS CONCERNING MY PAST WHICH CAN INCLUDE INFORMATION REGARDING; DRIVING, CREDIT, CRIMINAL/SEXUAL OFFENSES, CIVIL, EMPLOYMENT, TENANCY AND OTHER MISCELLANEOUS INFORMATION. I RELEASE ALL LIABILITY TO SWENSON OAKS APARTMENTS AND ALL OF THE ABOVE AGENCIES AND DEPARTMENTS, INCLUDING NATIONAL CREDIT REPORTING AND ITS AGENTS TO THE FULL EXTENT PERMITTED BY LAW FROM ANY CLAIMS, DAMAGES, LOSSES, LIABILITIES, AND EXPENSES ARISING FROM THE RETRIEVAL AND REPORTING OF INFORMATION. ALL REPORTS WILL BE KEPT CONFIDENTIAL.

ACCORDING TO THE FEDERAL FAIR CREDIT REPORTING ACT, I AM ENTITLED TO KNOW IF I WAS DENIED BASED ON THE INFORMATION OBTAINED AND UPON WRITTEN REQUEST, A DISCLOSURE WILL BE GIVEN TO ME ON THE SOURCE OF THE PUBLIC RECORD INFORMATION AND OF THE NATURE AND SCOPE OF THE INVESTIGATIVE REPORT.

I, THE UNDERSIGNED APPLICANT, DO HEREBY CERTIFY THAT THE INFORMATION PROVIDED BY ME IS TRUE AND COMPLETE TO THE BEST OF MY KNOWLEDGE. I ALSO UNDERSTAND THAT ANY COPY OF THIS DOCUMENT IS AS VALID AS THE ORIGINAL AND THAT FALSIFYING INFORMATION COULD RESULT IN DENIAL OF TENANCY.

PRINT FULL NAME _____

SOC. SEC # _____ *DATE OF BIRTH _____

CURRENT ADDRESS _____

CITY/STATE/ZIP CODE _____

PREVIOUS ADDRESS _____

CITY/STATE/ZIP CODE _____

DRIVER'S LICENSE # _____ STATE _____

APPLICANT'S SIGNATURE _____

* DATE OF BIRTH IS REQUESTED IN ORDER TO OBTAIN ACCURATE RETRIEVAL OF RECORDS

FOR PROPERTY MANAGERS USE ONLY:							
MEMBER ID# _____				REQUESTOR _____			
PROPERTY NAME _____				REF# _____			