



9 Promenade Street | Suite 1222 | Bluffton, SC | 29910 | (843) 815-2838

RENTAL VERIFICATION AUTHORIZATION

To: _____ Attention: _____

Fax/Email: _____ Phone: _____

From: ForeShore Rentals

Phone: 843-815-2838

ATTENTION:

THIS MESSAGE IS INTENDED ONLY FOR THE USE OF THE INDIVIDUAL OR ENTITY TO WHICH IT IS ADDRESSED AND MAY CONTAIN INFORMATION WHICH IS PRIVILEGED, CONFIDENTIAL AND EXEMPT FROM DISCLOSURE UNDER APPLICABLE LAWS.

If the reader of this message is not the intended recipient, you are hereby notified that any dissemination, distribution or copying of the communication is strictly prohibited. If you have received this communication in error, please notify us immediately by telephone and return the original message to us. Thank you.

The person below has signed this release form giving authorization to verify the requested information. Please complete this form and email it back to us as soon as possible.

Name: _____

Address: _____

Length of occupancy: _____

Monthly Rental Amount: \$ _____

Late Payments? Yes ___ No ___

NSF? Yes ___ No ___ (If yes, how many times? ___)

Were there any noise complaints? Yes ___ No ___

Was proper notice to vacate given? Yes ___ No ___

Was/will the security deposit be refunded? Yes ___ No ___

Was the property kept in good condition? Yes ___ No ___

Would you re-rent to this tenant? Yes ___ No ___

Payment history: _____

Name of Property Manager (Please print.): _____

Signature: _____ Date: _____

Prospective Tenant's Name (Please print.): _____

Prospective Tenant Signature: _____ Date: _____