RENTAL APPLICANT REFERENCE REQUEST

The below applicant is applying for tenancy with us. Please answer the questions in the section #4 and email or fax it back to us. We appreciate your prompt attention to this request.

1. Applicant's rental information (TO BE COMPLETED BY APPLICANT)

Move-in date: Month	Year	Move-out date: Month		_ Year	_or □curre	nt resident
Address of rental unit:		Unit #	City:		State:	Zip:
Email:				Fax number :()	
Name of Owner/Agent:				Phone number	:()	

2. Authorization by rental Applicant for the release of information (TO BE COMPLETED AND SIGNED BY APPLICANT)

I hereby authorize the release of the information requested on this Rental Applicant Reference Request to the Owner/Agent listed above. I hereby acknowledge that the Owner/Agent can make copies of this executed page in order to obtain the information requested.

Name:	Phone number: ()
Signature:	Date:

3. Person requesting the rental reference (Please email or fax within 24-48 hours)

Name of Owner/Agent:A.J (Property Manager)Fax no: (877) 312-8886Email: propertymanager@stoneridgerental.comAddress:6907 University Avenue, Suite# 235City: MiddletonState:WIZip: 53562Ph. number: (608) 571-3997

4. Rental reference information (TO BE COMPLETED BY FORMER OR CURRENT OWNER/AGENT)

۶	Did Applicant live at your property during the period indicated above?					
	If no, what were the dates of occupancy? From (month/year): To (month/year): /					
	Did Applicant provide notice for ending tenancy according to the terms of the rental agreement? 🗆 Yes 🗆 No					
	Not applicable because Applicant still resides at unit					
۶	ow many times during the past 24 months did Applicant pay the rent late? 🗆 0 🗆 1-2 🗆 3-5 🗆 6 or more					
۶	oes Applicant owe any amount for delinquent rent, utilities or damage to unit?					
۶	Did you ever serve a Five-Day Notice to Applicant? 🛛 Yes 🗆 No					
	If yes, please explain:					
۶	Was any check from Applicant returned due to non-sufficient funds (NSF)?					
۶	Was any rental unit damages, complaints, unlawful activity, unauthorized tenants or pets documented? 🗆 Yes 🗆 No					
	If yes, please explain:					
۶						
	If yes, please explain:					
۶						
۶	Would you rent to the applicant again? \square Yes \square No					
	Others, if any, please elaborate?					
 Inf	formation provided by:					
Na	me: Date:					
Ро	sition: Phone number: ()					
	Please email or fax this form to the person listed in section #3 as soon as possible (within 24-48 hours)					

STONEWOOD CROSSING REALTY LLC, 6907 UNIVERSITY AVENUE, SUITE 235, MIDDLETON, WI 53562 (Tel) 608-571-3997