



Rental Verification Form

We are requesting verification of rental history for the individual(s) named below, who stated that they are a current or past tenant. Please complete and return this form to us. If you have any questions or concerns, please contact us directly.

Applicant/Resident Name(s): _____

Current or Past Address: _____

Dates of Lease: _____

Monthly Rent: \$ _____

Were rent payments made on time? ☐ Yes ☐ No

If no, how many times were they late? _____

Were eviction papers ever filed? ☐ Yes ☐ No

If yes, how many times? _____ Was this tenant evicted? _____

Were there any pet(s) living in the home? ☐ Yes ☐ No

Was there any damage to the property caused by the pet(s)? ☐ Yes ☐ No

If yes, please provide more details _____

Was proper notice given before move-out? ☐ Yes ☐ No

Was the full deposit returned at move-out? ☐ Yes ☐ No

If no, please provide more details _____

Were there any noise complaints or lease violations? ☐ Yes ☐ No

If yes, please explain _____

Would you rent to them again? ☐ Yes ☐ No

Additional Comments: _____

Signature: _____

Print Name: _____

Title: _____

Date: _____

Company: _____

Email: _____

Phone Number: _____



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