



Northwest Management Exclusive, Inc.

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APPLICANT – SIGN AND DATE ONLY

RE: Rental History Verification

From: _____

To: _____

Please provide the following information on the current or previous resident listed below:

Name: _____

Address: _____

Resident from: _____ to _____

Was the resident on lease or month-to-month? _____

Rent amount: \$ _____

Number of late payments: _____

Number of NSF checks: _____

Any disturbance notices? _____

Any damages? _____

Tenant responsible for yard care, if so, satisfactory? _____

Any pets? _____

Was proper notice given? _____

Were they asked to leave? _____

Would you re-rent? _____

Are you a friend or relative? _____

Thank you for completing this questionnaire, please fax back at your earliest convenience.

Completed by: _____ Position: _____

I hereby authorize Northwest Management Exclusive, Inc. to complete a credit check, criminal background check and any additional inquiries deemed necessary to complete the screening process.

Signature of Applicant

Date