



VERIFICATION OF LANDLORD HISTORY

То _____

Date:______

Verification of information supplied by the applicant shown below Name ______ Address ______ SSN

This person has applied for an apartment at Ocean Park Village. We are required by the owner to verify all information that is used in determining this person's eligibility. We ask your cooperation in providing the following information and returning it to Ocean Park Village at the address below, fax it to **732-364-2901** or email to **infooceanpark@jerseyc.com**. The applicant has consented to this release of information as shown here.

Information being requested:

- 1. How long did the applicant reside at this address?
- 2. How many bedrooms? _____ How many people lived in this unit? _____
- 3. What was the monthly rent? _____
- 4. What was included in the rent? \Box Gas \Box Electric \Box Heat \Box Hot water
- 5. Was the applicant ever late in the payment of the monthly rent? _____ If yes, how many times after the 5th of the month in the past year?_____
- 7. What living condition did the applicant maintain?
 Acceptable
 Unacceptable
- 8. Did the applicant give proper notice? _____ What was the reason for leaving?
- 9. Would you re-rent to him in the future? _____ If not, Why? _____
- 10. Additional Comments:

and title of person giving information	m

Name of Agency or Organization

Date

Telephone number

Date

I hereby authorize the release of the requested information

Signature of Applicant

Ocean Park Village | 70 Pinehurst Dr | Lakewood, NJ 08701 | Phone: 732.994.6798 | Fax: 732-364-2901