



258 Carlton Avenue  
Piscataway, NJ 08854  
(732) 968-6320  
FAX: (732) 968-8970

## Pleasant View Gardens

### VERIFICATION OF LANDLORD HISTORY

To \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Date \_\_\_\_\_

Verification of information supplied by the applicant shown below

Name \_\_\_\_\_

Address \_\_\_\_\_

SSN \_\_\_\_\_

This person has applied for an apartment at Pleasant View Gardens Apartments. 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 Pleasant View Gardens Apartments at the fax number or address shown above. 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?  Gas  Electric  Heat  Hot water
5. Was the applicant ever late in the payment of the monthly rent? \_\_\_\_\_ If yes, how many times after the 5<sup>th</sup> of the month in the past year? \_\_\_\_\_
6. Was the applicant destructive to the apartment/home or the surrounding areas? \_\_\_\_\_  
If yes, please explain \_\_\_\_\_

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:

\_\_\_\_\_  
Print name and title of person giving information

\_\_\_\_\_  
Name of Agency or Organization

\_\_\_\_\_  
Signature of person giving information

\_\_\_\_\_  
Date

\_\_\_\_\_  
Telephone number

I hereby authorize the release of the requested information

\_\_\_\_\_  
Signature of Applicant

\_\_\_\_\_  
Date