

REVERE SUBURBAN REALTY CORP.

2301 Woodward Street, Philadelphia, PA 19115
Leasing Office Phone: 215.676.5056 Fax: 215. 673.8923
Main Office: 215. 676. 2220

VERIFICATION OF RESIDENCY

Applicants- please only sign where "Applicant's Signature" is indicated.
PLEASE DO NOT complete any additional line of this form.

To: (Landlord) _____ Date: _____

Re: (Applicant Name/Address)

Fax: _____ Phone: _____

To whom it may concern:

The above referenced individual has submitted an application to rent an apartment from us and has given your name as Landlord or previous Landlord. Kindly supply us with the following information regarding this individual's tenancy. We thank you for your prompt reply!

Sincerely,

The Leasing Team at Revere Suburban Realty Corporation

By: _____ Title: _____

**I/We, THE UNDERSIGNED, HEREBY AUTHORIZE THE
RELEASE OF THE REQUESTED INFORMATION**

Applicant's Signature Date Co- Applicant's Signature Date

(To be completed by Landlord or Landlord's Office)

Applicant has resided in your apartment: From: _____ To: _____

Applicant's current lease term expires: Date: _____

Has Applicant given you proper lease termination notice? Yes ___ No ___

Applicant's current monthly rental amount is: \$ _____

Has Applicant paid rent on time? Yes ___ No ___ How many times late? _____

How many rent payment checks have been returned for NSF? _____

Have you ever filed an action in court against Applicant? Yes ___ No ___

If Yes, for what reason? _____

Has the Applicant kept the apartment in good condition? Yes ___ No ___

Signature Date Title

