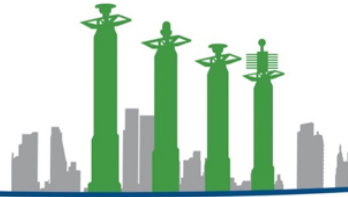




**Oz**  
**ACCOMMODATIONS**  
 Building Wealth Through Real Estate



## Rental History Verification Request

**Instructions:** This document is used to provide authority to potential resident's, current or past landlord for releasing information to Oz Accommodations to verify the rental history of the potential resident. Upon signing the document by potential resident, Oz Accommodations will send (only Oz may submit this to landlord) the executed verification request to the listed landlord to verify potential resident's rental history. Upon receipt current or previous landlord is requested to complete and return as soon as possible to allow completion of the application process.

To: \_\_\_\_\_ Date: \_\_\_\_\_  
 Phone: \_\_\_\_\_ Fax: \_\_\_\_\_  
 Email: \_\_\_\_\_

**From:**

**Leasing Department**

**Oz Accommodations, Inc.**

**7925 Bond, Lenexa, KS 66214**

**Subject:** The person listed below, a current or past lease holder with you, has applied for a rental property with our company. This form should be received by you directly from our office; if the applicant has delivered to you then please do not complete it and contact us. If any additional information is needed to complete this form then please contact us right away. We thank you in advance for your prompt and thorough completion of the required rental history verification. As a way of excelling in customer satisfaction, our goal is to provide approval/denial of our applications within 24 hours. Please return this form within 1 business day to the fax to 913.894.8401 or email to [homes@aplacelikehome.com](mailto:homes@aplacelikehome.com).

Applicant's Name: \_\_\_\_\_  
 Applicant's Address when Leasing from You: \_\_\_\_\_  
 Date of Lease/Occupancy: \_\_\_\_\_  
 Monthly Amount of Rent: \_\_\_\_\_ Number of Pets and Breed: \_\_\_\_\_  
 How many times was this Applicant late past their Grace Period?: \_\_\_\_\_  
 Has an Eviction ever been filed against this Applicant?:  Yes  No  
 If Yes, Please Explain: \_\_\_\_\_  
 Do you have any complaints about this Applicant?  Yes  No  
 If Yes, Please Explain: \_\_\_\_\_  
 Did this Tenant give Proper Notice to Vacate/Terminate their Lease?  Yes  No  
 Name and Title of person supplying this Information: \_\_\_\_\_

By signing below, I hereby grant permission for the person or business to whom this request is addressed to release any applicable information about my rental history to Oz Accommodations, Inc.



Name: \_\_\_\_\_ Signature of Applicant: \_\_\_\_\_ Date: \_\_\_\_\_