DATE:	
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I / We \_\_\_\_\_

CUSTOMER NUMBER: 4667

\_\_\_\_\_, prospective

## **TENANT INFORMATION FORM**

tenant(s) / buyer(s) for the property located at 130 Patri	icia Ave., Dunedin, FL, 34698 LOT#,	
Managed By:	Owned By:	
record to obtain information for the use in processing of this application. I / We inquiry. I / We cannot claim any invasion of provacy or any other claim that ma	uire into my / our credit file, criminal, and rental history as well as any other personal understand that on my / our credit file it will appear the TENANT CHECK has made an y arise against TENANT CHECK now or in the future.	
PLEASE PRINT CLEARLY		
TENANT INFORMATION:	SPOUSE INFORMATION:	
SINGLE: MARRIED:	SINGLE: MARRIED:	
SOCIAL SECURITY #:	SOCIAL SECURITY #:	
FULL NAME:	FULL NAME:	
DATE OF BIRTH:	DATE OF BIRTH:	
DRIVER LICENSE # ST:	DRIVER LICENSE # ST:	
CURRENT ADDRESS:	CURRENT ADDRESS:	
HOW LONG?	HOW LONG?	
LANDLORD & PHONE:	LANDLORD & PHONE:	
PREVIOUS ADDRESS:	PREVIOUS ADDRESS:	
HOW LONG?	HOW LONG?	
EMPLOYER:	EMPLOYER:	
OCCUPATION:	OCCUPATION:	
GROSS MONTHLY INCOME:	GROSS MONTHLY INCOME:	
LENGTH OF EMPLOYMENT:	LENGTH OF EMPLOYMENT:	
WORK PHONE NUMBER:	WORK PHONE NUMBER:	
HAVE YOU EVER BEEN ARRESTED? (CIRCLE OR CHECK ONE) YESNO	HAVE YOU EVER BEEN ARRESTED? (CIRCLE OR CHECK ONE) YES NO	
HAVE YOU EVER BEEN EVICTED? (CIRCLE OR CHECK ONE) YESNO	HAVE YOU EVER BEEN EVICTED? (CIRCLE OR CHECK ONE) YESNO	
SIGNATURE:	SIGNATURE:	

TENANT CHECK HOURS OF OPERATION
MONDAY – FRIDAY: 9:00 a.m. - 5:30 p.m.
SATURDAY: 11:00 a.m. TO 4:00 p.m.
ALL ORDERS RECEIVED AFTER 5:00 p.m. (3:30 p.m. ON SAT.) WILL BE PROCESSED THE NEXT BUSINESS DAY

TENANT CHECK FAX #: (727) 942-6843

IF THE WRONG SOCIAL SECURITY NUMBER IS SUBMITTED, A SECOND APPLICATION FEE WILL BE CHARGED TO RE-PULL THE REPORT.

A CREDIT REPORTING SERVICE PROVIDING CREDIT REPORTS FOR REALTORS/PROPERTY MANAGERS/APARTMENT COMPLEXES/MOBILE HOME PARKS/CONDOMINIUM ASSOCIATIONS/EMPLOYERS

PHONE NUMBER:

PHONE NUMBER: