Binx Properties leasing.managment.maintenance (434) 962-4147 Fax (434) 202-8315

EMPLOYMENT/RENTAL VERIFICATION FORM

To whom it may concern,

The person(s) listed below has submitted an application for housing. Please assist the approval process by answering the following questions. This information is for our confidential use for qualifying this applicant.

Your prompt reply will be appreciated and will facilitate the speed with which we can respond to this applicant's needs.

EMPLOYMENT VERIFICATION (A	Applicant plea	ase print name only)			
Name:	Position:				
Hired Date:		Annual Salary: \$			
s employment permanents? Yes	No	Part-time	Full-time		
Additional Comments:					
Verified by:					
Title:					
Address:		· · · · · · · · · · · · · · · · · · ·			
low many times late?	N	•	to vacate given?	Yes _	
How many times late? to	W	Vas the require notice Vhat is the current co		Yes _	No _
How many times late? to Period of residency: to Amount of rent: \$	W W No D	Vas the require notice Vhat is the current co Vhat was the unit conc oes tenant comply wit	to vacate given? ndition of the unit? dition when vacated? h non smoking policies?	Yes Yes _	No _
Is rent paid promptly? Yes No How many times late? to Period of residency: to Amount of rent: \$ Has legal action ever been taken? Yes Additional comments: Verified by:	W W No D W	Vas the require notice Vhat is the current con Vhat was the unit conc oes tenant comply wit Vould you rent to this	to vacate given? ndition of the unit? dition when vacated? h non smoking policies? person again?	Yes Yes _ Yes _	No _