

Return to: FCA, Attention Admissions 105 Juliette Fowler St., Dallas, TX 75214 Phone: (214) 821-4061 / Fax: (214) 818-0345

## LANDLORD VERIFICATION

The person named below has applied for an apartment at our community and has stated that you are his/her present or previous landlord. Please complete the information requested below, sign and date the form and return by either Fax or Mail. By signing below, the applicant is authorizing release of this information. Your assistance is greatly appreciated. This information is requested by:

Malena Davis, Admissions Coordinator	Date
Applicant to Complete - AUTHORIZATIO	N TO RELEASE INFORMATION OF RESIDENCY
Landlord Name: Pro	perty Name:
Address:	
Tenant Name: Social Securi	ity #:
Address:	
	e the information requested below: I will not hold the landlord or its
	derstand that the information includes, but is not limited to rental
payment history, reason for moving, housekeeping habits, dama	
Applicant Signature:	Date:
LANDLORD TO COMPLETE: 1. When did Applicant rent from you? From://	10. Did Applicant leave owing you money for rent or
	damages? 🗆 Yes 🗆 No
2. How much was the Applicant's monthly rent? \$	If yes: Amount of rent? \$
3. Is any portion of the rent paid by HUD subsidy?	Amount of damages? \$
□ Yes □ No	11. Was Applicant evicted?
4. Did Applicant's payment history include any late payments?	□ Yes □ No If yes: Reason:
□Yes □No	
5. Did Applicant have a history of disturbance to neighbors or	12. Was the Applicant evicted for drug-related criminal activity?
domestic disputes?	🗆 Yes 🛛 No
□ Yes □ No If yes: How Often?	If Yes, is this a federally assisted (subsidized) housing?
6. Did Applicant display housekeeping habits that would	🗆 Yes 🛛 No
adversely affect the health or safety of other residents?	13. Did Applicant engage in illegal use of a drug or display a pattern
Yes No If Yes: Describe:	of illegal use that interfered with the health, safety, or right to
7. Did Applicant have any Bed Bug Infestations?  Yes No	peaceful enjoyment by other residents?
8. Did Applicant damage their unit or common areas?	🗆 Yes 🛛 No
□ Yes □ No If yes: Describe:	14. Did Applicant abuse alcohol or have a pattern of abuse that
	interfered with the health, safety, or right to peaceful enjoyment
9. Did Applicant give you a proper notice to vacate?	by other residents? 🛛 Yes 🛛 No
□ Yes □ No Reason for moving?	15. Would you rent to Applicant again? 🗖 Yes 🗖 No
	Why/Why Not?
Please print Name & Title of Person Supplying Information	
	Phone Number:
	Date:

## Signature

PENALTIES: Title 18, Section 1001 of the U.S. Code states that a person is guilty of a felony for knowingly and willingly making false or fraudulent statements to any department of the United States Government. HUD and any owner (or any employee of HUD or the owner) may be subject to penalties for unauthorized disclosures or improper use of information collected based on the consent form. Use of the information collected based on this verification form is restricted to the purpose cited above. Any person who knowingly or willfully requests, obtains or discloses any information under false pretenses concerning an applicant or participant may be subject to a misdemeanor and fined not more than \$5000, Any applicant or participant affected by negligent disclosure of information may bring civil action for damages, and seek other relief, as may be appropriate, against the officer or employee of HUD, or the owner responsible for the unauthorized disclosure or improper use. Penalty provisions for misusing the social security number are contained in the Social Security Act at 42 U.S.C. 208a (6), (7), and (8). Violation of these provisions are cited as violations of 42 U.S.C. 408a (6), (7), and (8).

