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LANDLORD REFERENCE REQUEST FORM

TENANT'S AUTHORIZATION PURSUANT TO VIRGINIA CODE 55-248.9:1

I authorize the free and complete release of all information about my tenancy at ANY rental unit, and agree to hold harmless anyone who so responds in good faith. A copy/fax of this authorization shall be accepted as if original.

Name of Applicant

Signature of Applicant

Date

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Signature of Applicant

Date

Hello Management/Landlord;

The Tenant(s) named above have applied with PPM for a rental unit and have authorized disclosure of information.

We understand you have previously rented or are currently) renting to them at: _____

Please furnish the following information as applicable and return by fax, email, mail or in person. We cannot consider this form valid if delivered by the tenants themselves.

1. When did the Tenant rent from you? From _____ To _____
2. Rent amount during last month of tenancy? _____ Were any utilities included? _____
3. Rent was received more than 5 days late _____ times (Please indicate 0 or number of times) _____
4. Any property damages or lease violations at any time during tenancy? **Yes No** If yes, for what reason(s)? _____
5. Did/will the Tenant receive the full security deposit refund? **Yes No N/A (Pending Move-Out)**
6. Have you ever received any complaints from neighbors of Tenant? **Yes No** If yes, what kind? _____
7. Has Tenant completed the lease term? **Yes No** Given official notice? **Yes No**
8. Was Tenant asked to vacate by Landlord, Agent, or Court Order? **Yes No** If yes, for what reasons(s)? _____
9. Is Tenant current with all lease payments and any outstanding fees? **Yes No**
10. Are you related to Tenant by family or marriage? **Yes No**
11. Did/Does Tenant(s) have any pets? **Yes No** How many & what kind/size? _____
12. Would you lease to Tenant again? **Yes No**
13. Add any more comments or concerns: _____

Signed by Authorized Manager, Landlord, or Agent Responding

Print Name

Date