



Phone: (937) 708-0492  
Fax: (937) 999-2455  
Email: [manager@CedarDriveApartments.com](mailto:manager@CedarDriveApartments.com)

### RENTAL HISTORY VERIFICATION

This request is being sent to: \_\_\_\_\_

Date of original request: \_\_\_\_\_ Date of second request: \_\_\_\_\_

Applicant's Name: \_\_\_\_\_ Phone: \_\_\_\_\_

Applicant Address: \_\_\_\_\_

Applicant signature for Authorization to Release: \_\_\_\_\_

We appreciate your accurate and timely response with the following:

1. Address: \_\_\_\_\_

2. Move in date: \_\_\_\_\_ Move out date: \_\_\_\_\_

3. How many late payments? \_\_\_\_\_ How many NSF payments? \_\_\_\_\_

4. What day is rent considered late? \_\_\_\_\_

5. Last rental rate: \_\_\_\_\_

6. Did resident have pets? Yes \_\_\_\_\_ No \_\_\_\_\_

7. Did resident behavior and illegal activity? \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

8. Did you file eviction on resident? Yes \_\_\_\_\_ No \_\_\_\_\_

9. If yes, was a judgment granted? Yes \_\_\_\_\_ No \_\_\_\_\_ N/A \_\_\_\_\_

10. Please rate their housekeeping (10 being excellent): 1 2 3 4 5 6 7 8 9 10

11. Is their account current? Yes \_\_\_ No \_\_\_

Signature of person verifying information: \_\_\_\_\_

Title: \_\_\_\_\_

Date: \_\_\_\_\_

Please scan/email completed form back to [Manager@CedarDriveApartments.com](mailto:Manager@CedarDriveApartments.com)

Or Fax to 937-999-2455

Or bring into office located at  
Cedar Drive Apartments, 713-13 Cedar Drive  
Fairborn, OH 45324, 937-708-0492