



RENTAL VERIFICATION FOR DRAGONFLY PROPERTIES & INVESTMENTS, LLC.

THIS SECTION TO BE COMPLETED AND EXECUTED BY TENANT

MGT CO. OR LANDLORD _____ Phone: _____

TENANT(S) NAME: _____ Date: _____

PROPERTY ADDRESS: _____

I hereby authorize release the information requested below for my rental address listed above.

Signature of Applicant/Tenant Date

The individual named above is an applicant/tenant of Dragonfly Properties that requires verification of rental history. The information provided will remain confidential to satisfaction of that stated purpose only. Please fax or email this form back to our office 239-369-7467 or info@dragonflyrenatl.com. If you have any questions, please call our office at 239-645-1104.

Your prompt response is crucial and greatly appreciated.

Management Agent

THIS SECTION TO BE COMPLETED BY LANDLORD/MANAGEMENT COMPANY

Please note if the applicant is a current resident or a past resident at your property.

Lease start date: _____ Lease end date: _____

Amount of rent: _____

Number of late payments: _____ Number of NSF checks: _____

Table with 3 columns: Question, YES, NO. Rows include: Has proper notice been given?, Is there currently any past due amount owed on the resident's account?, Has the resident complied with all community policies?, Has the resident withheld rent for any reason?, Does this resident keep an animal on the premises?, Has the animal at any time caused a problem or been a nuisance?, Have legal proceedings ever been filed on this resident?, Would you rent to this resident in the future?, Have you done a move out inspection of the property yet?

Additional remarks: _____

Landlord's Signature Landlord's Printed Name Date

Phone # Fax # E-mail
