"Property Management at Its Best"



Austin Tyler & Co

Verification of Residency

INSTRUCTIONS: <u>TWO FULL YEARS</u> of residency are required. If you did not own your own home during this time or a portion thereof, please complete this form for that time period. Please make copies of this form as needed for each current/previous Landlord(s)/Owner(s) to fill out their section. Upload the completed form(s) within your Portal, send via fax to 850-526-1116, or via email to email @austintylerco.com.

Applicant: Complete This Section

I hereby authorize my Landlord/Owner to furnish the information requested below:

Applicant Name

Social Security Number

XXX-XX-

Date

Property Address to be verified (including City, State and Zip Code)

Applicant Original Signature

Applicant: DO NOT COMPLETE THIS SECTION. IT IS FOR THE OWNER ONLY.

-			Proper Notice Given? Number of Occupants:
			Eligible to Rent Again?
Is applicant responsible party or occupant only?			
Why did applicant move out?			
Are you friends/family of applicant? Yes / No If Yes, Explain			
Late payments, NSF's, violations, and/or comments:			
Property Name (if applicable)		E	Email Address
Owner Original Signature		F	Phone Number
Owner Name (Please Print)		C	Date

This Section for Austin Tyler & Co Only

Contact Authenticated

Date