

Criminal Background Check Consent for Apartment Rental Form

I hereby authorize THE FOUNTAINS APARTMENTS to receive any criminal history record information pertaining to me, which may be in the file of any state or local criminal justice agency in any State. This information will be used to determine eligibility to rent an apartment.

The sex offender list will be checked at the same time.

Please Print:

Last Name First Middle Maiden

Home Address

City State Zip Code

Sex Date of Birth Driver's License

Social Security Number

Signature Date

DO NOT WRITE BELOW THIS LINE

CRIMINAL RECORD-ATTACHED

NO CRIMINAL RECORD-ATTACHED

Verified by: Signature Date:

DO NOT WRITE BELOW THIS LINE - MANAGEMENT USE ONLY

APPLICATION DISPOSITION:

Approved: _____ **Approved by:** _____
Date **Signature** **Title**

Disapproved: _____ **Disapproved by:** _____
Date **Signature** **Title**

Reason(s) for Disapproval:

Application Denied in writing on: _____

Application Appealed Decision on: _____ (Written notification attached)

Application Appeal Reviewed by: _____
Signature/Title **Date**

Appeal Decision: _____ **Approved** _____ **Disapproved**

Applicant Notified in Writing on: _____