**RC CONNECTORS, LLC**

King’s Ridge Office: 860.651.3200

144 Hopmeadow Street Fax: 860.651.6300

Simsbury, CT 06089

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| **LANDLORD REFERENCE** |

**APPLICANT:** Please complete the **top portion** of this form so that your current landlord may release the requested information.

 APPLICANT: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ DATE: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 LANDLORD: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 LANDLORD’S

 ADDRESS: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 Street Apt. # City State/Zip Code

 PHONE NUMBER: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ FAX NUMBER: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 SIGNATURE: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 Resident’s Signature to authorize Release of Information

**LANDLORD:** Your resident has applied for rental of an apartment managed by RC Connectors, LLC. As part of the qualification process, we require a reference from the applicant’s current landlord and basic information requested below. Any information released will be kept in the strictest confidence. Please return this form via facsimile or U.S. mail to the number or address noted above. Thank you for your cooperation.

RC Representative: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 Is applicant party to a lease/rental agreement? \_\_\_\_\_\_\_\_\_\_ If so, expiration date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 How long have they resided at the above address? \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 Is the rental account current? \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Monthly Rent: \_\_\_\_\_\_\_\_\_\_\_\_\_

 Rent is generally paid: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ On-Time, \_\_\_\_ Occasionally Late, \_\_\_\_ Often Late, \_\_\_\_

 Have any legal notices been served to this resident? \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 Have there been any noise complaints against this resident? \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 Housekeeping habits: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Good, \_\_\_\_\_\_\_\_\_\_\_\_Average, \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Poor

 Would you rent to this person again? \_\_\_\_\_\_\_\_\_\_\_ Yes, \_\_\_\_\_\_\_\_\_ No \_\_\_\_\_\_\_\_\_\_\_\_\_\_Not Sure

 Comments: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 (Please Print) Name & Title of Authorized Person \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 Date \_\_\_\_\_\_\_\_\_\_\_ Phone + Ext. \_\_\_\_\_\_\_\_\_\_\_\_ Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_