

BANKING REFERENCES (continued)

Name _____ Phone # (_____) _____

Address _____

Account # _____ Number _____ Street _____ City _____ State _____ Zip _____
Checking _____ Savings _____ Balance _____

Name _____ Phone # (_____) _____

Address _____

Account # _____ Number _____ Street _____ City _____ State _____ Zip _____
Checking _____ Savings _____ Balance _____

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OTHER INFORMATION
THE PRINCIPALS

1) _____ Title _____

Last _____ First _____ Middle _____

Social Security # _____ Date of Birth _____

Address _____

Number _____ Street _____ City _____ State _____ Zip _____

2) _____ Title _____

Last _____ First _____ Middle _____

Social Security # _____ Date of Birth _____

Address _____

Number _____ Street _____ City _____ State _____ Zip _____

3) _____ Title _____

Last _____ First _____ Middle _____

Social Security # _____ Date of Birth _____

Address _____

Number _____ Street _____ City _____ State _____ Zip _____

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CREDIT REFERENCES

1) Company _____ Phone # (_____) _____

Address _____

Number _____ Street _____ City _____ State _____ Zip _____

Account # _____ Contact Person _____

2) Company _____ Phone # (_____) _____

Address _____

Number _____ Street _____ City _____ State _____ Zip _____

Account # _____ Contact Person _____

3) Company _____ Phone # (_____) _____

Address _____

Number _____ Street _____ City _____ State _____ Zip _____

Account # _____ Contact Person _____

AUTHORIZATION

Bern Realty, LLC or any firm acting on its behalf is hereby granted permission to perform a credit check on our company and/or its principals.

- 1) SIGNATURE: _____ DATE _____
BY _____ TITLE _____

- 2) SIGNATURE: _____ DATE _____
BY _____ TITLE _____

- 3) SIGNATURE: _____ DATE _____
BY _____ TITLE _____

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FOR OFFICE USE ONLY

Note: Advise the applicant to authorize banks, landlords, and credit references to release all relevant information to Bern Realty, LLC or any tenant screening service acting on its behalf.

Remarks: _____

Move in Date _____ Space # or Unit Address _____ Base Rent _____

Not Accepted: Reason _____