



# RMS Team *at* RE/MAX Center

*Residential Management Services*

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## AUTHORIZATION FOR RELEASE OF INFORMATION

RE/MAX Center is hereby expressly authorized to verify the accuracy of information (including credit reports), which the Landlord may require to evaluate this application. I hereby certify that the information given to complete my application for tenancy is correct and complete. I authorize you to make any and all inquiries you feel necessary to evaluate my application for housing. I further understand that any false or incomplete information is grounds for immediate rejection of this application. I specifically authorize and request all present or previous employers, mortgage holders, landlords, rental agents, credit grantors, banks, accountants, stockbrokers, and local, State and Federal Government Agencies to release any requested information in the evaluation of my application for rental housing.

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APPLICANT SIGNATURE

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Date

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