

# **GREYSTAR MANAGEMENT SERVICES**

## **EMPLOYMENT VERIFICATION REQUEST**

Name of Employer: \_\_\_\_\_

To Whom It May Concern:

With this letter, I grant you permission to disclose the information requested below to La Ventana Apartment Homes. I would appreciate the return of this document as soon as possible in order to complete the verification process on my new apartment home. Thank you for your cooperation.

\_\_\_\_\_  
Employee Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Social Security Number

Employee Name: \_\_\_\_\_

Hire Date: \_\_\_\_\_ End Date: \_\_\_\_\_

Position: \_\_\_\_\_

Full Time: \_\_\_\_\_ Part Time, How Many Hours: \_\_\_\_\_

Salary: \_\_\_\_\_

Commissions \_\_\_\_\_ Weekly \_\_\_\_\_ Monthly \_\_\_\_\_ Annually \_\_\_\_\_

Authorized Signature: \_\_\_\_\_

Title \_\_\_\_\_ Contact #: \_\_\_\_\_

Please Fax Completed Form To: (505) 298-2425

If You Have Questions, Please Call: (505) 298-2420

# GREYSTAR MANAGEMENT SERVICES

## RESIDENT VERIFICATION REQUEST

Date: \_\_\_\_\_

Phone: \_\_\_\_\_ Fax: \_\_\_\_\_

Management Company/Apartment Community: \_\_\_\_\_

\_\_\_\_\_

Attention: \_\_\_\_\_

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\_\_\_\_\_  
Resident Signature

\_\_\_\_\_  
Date

Resident Name: \_\_\_\_\_

Address: \_\_\_\_\_

Move In Date: \_\_\_\_\_ Move Out Date: \_\_\_\_\_

Lease Expires: \_\_\_\_\_ Eviction: Yes \_\_\_\_\_ No \_\_\_\_\_

Lease Fulfilled: Yes \_\_\_\_\_ No \_\_\_\_\_

Proper Noticed Given: Yes \_\_\_\_\_ No \_\_\_\_\_

Any Pets Yes \_\_\_\_\_ No \_\_\_\_\_

If "Yes" What Kind: \_\_\_\_\_

Monthly Rental Amount: \$ \_\_\_\_\_ Paid On Time: Yes \_\_\_\_\_ No \_\_\_\_\_

If "No" How Many Times Late: \_\_\_\_\_

\_\_\_\_\_  
Late Fees Paid As Agreed: Yes \_\_\_\_\_ No \_\_\_\_\_ Any NSF'S: Yes \_\_\_\_\_ No \_\_\_\_\_

Authorized Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Title: \_\_\_\_\_

Please Fax Completed Form To: \_\_\_\_\_ (505) 298-2425

If You Have Questions, Please Call: \_\_\_\_\_ (505) 298-2420