

**La Serena at the Heights
2951 Siena Heights Drive
Henderson, NV 89052
Phone: 702-214-2600 Fax: 702 214-2605**

Landlord Reference Check

Applicant(s): _____ Phone: _____
 Landlord/Company: _____ Fax: _____
 Street Address: _____ Unit#: _____
 City/State/ZIP: _____

I hereby authorize the full release of the information requested which includes, but is not limited to the following. It is understood and agreed that a photocopy or FAX of this release form shall be considered the same as if it were the original and carries my full authorization to release the information requested.

 _____ **Date**

TO BE COMPLETED BY LANDLORD			
Date of Residency	_____ / _____ / _____	to	_____ / _____ / _____
Did Resident Pay on Time?	_____ YES _____ NO		_____ How Many Lates?
Did you receive a Security Deposit?	_____ YES _____ NO		_____ How Much Returned?
Did Resident Cause Damage?	_____ YES _____ NO		_____ Amount of Damage?
Were Police Called for Disturbances?	_____ YES _____ NO		
Problems with their Neighbors	_____ YES _____ NO		
Did Resident have Pets?	_____ YES _____ NO		
Did Resident Violate Lease?	_____ YES _____ NO		
Did Resident Give Proper Notice?	_____ YES _____ NO		
Reason For Leaving:	_____		
Would you Re-Rent to this Resident?	_____ YES _____ NO		
Additional Comments:	_____ _____ _____		
Signature of Person Completing	_____	Date	_____
		Title	_____