

Haywood Village

919 Haywood Road

Asheville, NC 28806

Phone: 828-707-2263

haywoodvillageapartments@gmail.com

APARTMENT RENTAL VERIFICATION REQUEST

APPLICANTS: Please only fill out the areas with asterisks.

LEASING OFFICE: Please fill out the remaining information.

Current ()

Previous ()

*Phone: () ____ - ____ FAX: () ____ - ____

*Attn: _____

*Tenant Name: _____

*Address: _____ Apt.# _____

Move-in Date: _____ Move-out Date: _____

Expiration Date: _____

Was proper notice given? Yes (____) No (____)

Rental Amount: _____

Number of late payments: _____

Number of NSF's: _____

Complaints: _____ What type: _____

Damage to unit: _____

Would you re-rent? Yes (____) No (____)

Verified by: _____

Position: _____ Date: _____

Please release my information for residency.

*Applicant's Signature: _____ Date: _____

*Applicant to fill out.