

Rol-Park Village
8049 Veterans Hwy., #34
Millersville, MD 21108
Phone: 410-969-9067
Rolpark1@icloud.com

An application has been made by the person(s) shown on this letter for residency in our community. The applicant(s) has indicated that you are/were his previous landlord. Please complete the information and return to us as soon as possible. Thank you!

Renee Mattison, Park Mgr.

Name and Address of Applicant: _____

I hereby give my approval for verification of my rental history.

Applicant's Signature Date: _____

TO BE COMPLETED BY LANDLORD

Is the person(s) above presently under a lease? _____

How long has he/she lived there? _____

Has he/she been given notice to vacate? _____

Current monthly rent: _____

Has he/she ever been late with the rent? _____ If so, how many times? _____

Does he/she currently owe money? _____

Does he/she have any pets? _____ What kind and how much do they weigh? _____

Have there been any disturbances or complaints? _____

If so, what type? _____

Would you rent again to this resident? _____

Landlord's Name and Phone Number: _____

Authorized Signature & Date: _____

Thank you for your assistance. **Please return to the attention of: Renee Mattison, Park Mgr. at address above.**