

**LANDLORD VERIFICATION**

APPLICANT NAME: \_\_\_\_\_

ADDRESS: \_\_\_\_\_

LANDLORD NAME: \_\_\_\_\_

ADDRESS: \_\_\_\_\_

*Please be advised that the aforementioned individual has applied for membership into the Maple Root Village or Ramblewood Estates located in Coventry, Rhode Island. Please fill out the requested information for the aforementioned applicant and return via fax to (401) 385-9512 or email: mrrccoventry@gmail.com.*

*Thank you for your anticipated cooperation in this matter.*

**TO BE COMPLETED BY LANDLORD OR AGENT ONLY**

MOVE-IN DATE: \_\_\_\_\_ MOVE-OUT DATE: \_\_\_\_\_

MONTHLY RENT: \$ \_\_\_\_\_ PAID ON TIME: \_\_\_\_\_

ANY LEGAL ACTION TAKEN: \_\_\_\_\_

IF YES, PLEASE EXPLAIN: \_\_\_\_\_

\_\_\_\_\_  
WAS THE UNIT KEPT IN GOOD CONDITION? \_\_\_\_\_

NUMBER OF PEOPLE LIVING IN UNIT: \_\_\_\_\_ PETS: \_\_\_\_\_

WOULD YOU RENT TO THIS PERSON/FAMILY AGAIN? \_\_\_\_\_

IF NO, PLEASE EXPLAIN: \_\_\_\_\_

ANY OTHER COMMENTS: \_\_\_\_\_

LANDLORD/AGENT SIGNATURE \_\_\_\_\_

TITLE: \_\_\_\_\_

PHONE # \_\_\_\_\_