

Authorization to Release Information

The Seasons Apartments
8650 W. Rifleman Street
Boise, ID 83704

I, _____, represent that I am applying to rent a residential premises from The Seasons Apartments.

It is important that my prospective landlord or property manager be provided with information regarding my tenancy with current or former landlord or property managers, credit history, employment history, and any criminal records.

I, the above named, give The Seasons Apartments permission to communicate with my current and former landlord or property manager for the purpose of discussing any and all of the facts and circumstances of my current or former tenancy, as well as the other information listed on my application. There are no limitations or restrictions regarding what may be discussed or revealed. I also give my permission to communicate with my current employer(s) and/or supervisor(s) for the purpose of verifying the employment information listed on my application. I am aware that a credit history, eviction search and/or criminal background check will be done in conjunction with my application.

I hereby hold The Seasons Apartments, LLC, DBA The Seasons Apartments free and harmless of any liability for providing written or verbal information and/or discussing the quality of my tenancy with current and former landlords, property managers, supervisors, or employers. Permission and consent is hereby granted to provide copies of my entire tenancy file, credit history and/or criminal record history.

I understand that I may have the right to make a written request within a reasonable period of time to receive additional, detailed information about the nature and scope of this investigation.

I understand that if my application is denied or is accepted with conditions, the community will provide the name, address, and telephone number of the consumer reporting agencies which provided my consumer information.

Applicant Signature

Date

Applicant Name (Print)

Date

