

# Authorization for Landlord Reference

_____ Name of Landlord	<input type="checkbox"/> Current Landlord <input type="checkbox"/> Previous Landlord	
_____ Address	_____ Name of Applicant/Co-Applicant	
_____ Address	_____ Rental Unit Address	
The individual(s) listed above has/have completed an application for housing with our apartment community and has listed you as a previous or current Landlord. Please answer each question and return the form to the address shown below or via fax. Thank you in advance for your cooperation and prompt return. The signature below provides you permission to provide information regarding the residency		
_____ Applicant's Signature	_____ Co-Applicant's Signature	_____ Manager's Signature

Please return form to: **Local Local, LLC Attn: Jacqueline M.**  
 16-566 Keaau Paho Road Suite 188  
 Keaau, Hawaii 96749

Fax Number: 1 (818) 646- 6865  
 Email: [jackie@locallocalhome.com](mailto:jackie@locallocalhome.com)

Applicant's Name		Dates of Residency	
Street:		From:	To:
City:	State:	Zip:	
<b>RENT PAYMENT HISTORY</b>			
Is (was) applicant current on Rent?		Yes	No
Is (was) applicant ever late paying rent?	How late?	How Often?	
Have (had) you ever begun eviction proceedings for nonpayment of rent?		Yes	No
<b>CARE OF UNIT</b>			
Does (did) the applicant or guests keep the unit clean?		Yes	No
Has (had) the applicant or guest damaged the unit?		Yes	No
If yes, how extensive?		How Often?	
Describe:			
Has (had) the applicant paid for the damage(s)?		Yes	No
will (did) you keep any Security Deposit for damages?		Yes	No
<b>GENERAL INFORMATION</b>			
Does (did) the applicant permit persons other than those on the lease to live in the unit?		Yes	No
Has the applicant, family members or guests damaged or vandalized the common areas?		Yes	No
Does (did) the applicant or guest create any physical hazards to the premises or residents?			
Does (did) the applicant or guest interfere with the rights and quite enjoyment of residents?		Yes	No
If yes, describe:			
Has (had) the applicant given you any false information?		Yes	No
If yes, describe:			
Has the applicant illustrated an inability to get along with other residents?		Yes	No
Have you observed the applicant in situations which illustrated a drug or alcohol problem?		Yes	No
Did (does) the applicant satisfy the requirements of tenancy such as notice to vacate, ect?		Yes	No
If no, explain:			
Are you related to this applicant family?		Yes	No
Would you rent to this applicant again?		Yes	No
If no, why not:			
Signature:		Date:	