

**RESORT
MANAGEMENT**
Community Association Management

BACKGROUND/CREDIT CHECK APPLICATION

PROPERTY INFORMATION				
Address		City	State	Zip Code
Move-In Date	Move-out Date (if applicable)			
PRIMARY APPLICANT				
Full Name		Date of Birth	Social Security Number	
Present Address		Present City	State	Zip Code
Primary Phone Number	Drivers License Number	Primary Email Address		
SECONDARY APPLICANT (IF APPLICABLE)				
Full Name		Date of Birth	Social Security Number	
Present Address		Present City	State	Zip Code
Primary Phone Number	Drivers License Number	Primary Email Address		

I/we authorize Resort Management and Rental History Reports to do a complete investigation of all information provided with my application for residency. I have personally filled in and/or reviewed all information within the application. A complete investigation may include any or all of the following: Credit Report, Criminal Record, Rental History References (including MPHA), Employment Verification, Eviction Records and Personal Interviews with references. This authorization is for this transaction only and continues for (1) year unless limited by state law, in which case the authorization continues in effect for the maximum period, not to exceed (1) year, allowed by law. I acknowledge that Rental History Reports provides reports by written, electronic or verbal instructions to property managers of my choice and does not participate in the approval or denial process, and does not guarantee an approval. My submitting this application below acknowledges and agrees with all terms above and authorizes companies to release rental, eviction, credit and criminal record information. Any controversy or claim arising out of or relating to this agreement, or breach thereof, shall be settled by arbitration administered by the American Arbitration Association in accordance with its Commercial Arbitration Rules, and judgment on the award rendered by the arbitrator(s) may be entered in any court having jurisdiction thereof.

Primary Applicant Signature

Date

Secondary Applicant Signature

Date