



# LANDLORD LINK, LLC.

P.O. Box 61 – Safety Harbor, Fl. 34695 (727) 723-7878 (office) (727)-723-7879 (fax)

[www.mylandlordlink.com](http://www.mylandlordlink.com) (website) [landlordlink1@aol.com](mailto:landlordlink1@aol.com) (e-mail)

## Tenant Screening Application for Rental Property

Landlord Name and Phone \_\_\_\_\_(Required).

I/We prospective tenants hereby allow LandLord Link, LLC. To inquire into my/our credit file, employment and rental history to obtain information for the above listed landlord. I/We understand that an inquiry from TransUnion Credit Bureau will appear on our credit report. I/We further understand that LandLord may decide to report rent payments to the Credit Bureau and an Account by LandLord Link will appear on our credit report. I/We cannot claim any invasion of privacy against LandLord Link now or in the future. I/We agree to provide positive identification in conjunction with this application. I/We further authorize LandLord Link, LLC. To disclose results of the inquiries with potential landlords in connection with the leasing of the Landlords property.

### Primary Tenant Information

### Spouse / Roommate / Co-Applicant Information

\_\_\_\_\_  
First Name                      MI                      Last Name

\_\_\_\_\_  
First Name                      MI                      Last Name

\_\_\_\_\_  
Date of Birth                      Social Security Number

\_\_\_\_\_  
Date of Birth                      Social Security Number

\_\_\_\_\_  
Present Address (Street Number - NO P.O. Boxes)

\_\_\_\_\_  
Present Address (Street Number – NO P.O. Boxes)

\_\_\_\_\_  
City, State and Zip Code (required)

\_\_\_\_\_  
City, State and Zip Code (Required)

\_\_\_\_\_  
Employer Name                      How Long

\_\_\_\_\_  
Employer Name                      How Long

\_\_\_\_\_  
Employer Phone Number                      Monthly Income

\_\_\_\_\_  
Employer Phone Number                      Monthly Income

Arrested \_\_\_\_ Yes \_\_\_\_ No \_\_\_\_ When      Evicted \_\_\_\_ Yes \_\_\_\_ No \_\_\_\_ When

Arrested \_\_\_\_ Yes \_\_\_\_ No \_\_\_\_ When      Evicted \_\_\_\_ Yes \_\_\_\_ No \_\_\_\_ When

Bankruptcy \_\_\_\_ Yes \_\_\_\_ No \_\_\_\_ When      Collections \_\_\_\_ Yes \_\_\_\_ No \_\_\_\_ When

Bankruptcy \_\_\_\_ Yes \_\_\_\_ No \_\_\_\_ When      Collections \_\_\_\_ Yes \_\_\_\_ No \_\_\_\_ When

\_\_\_\_\_  
Contact Phone Number

\_\_\_\_\_  
Contact Phone Number

\_\_\_\_\_  
Signature & Date (Required or will not be processed)

\_\_\_\_\_  
Signature and Date (Required or will not be processes)