



LOSS REALTY GROUP
6060 RENAISSANCE PLACE-SUITE A, TOLEDO, OHIO 43623

**TENANT SCREENING AUTHORIZATION FOR RELEASE
FAIR CREDIT REPORTING ACT NOTICE**

I authorize LOSS REALTY GROUP (Landlord/Property Manager/Agent for Owner) to obtain a consumer credit report in connection with my application to rent or lease property at:

I understand that the report will contain information about my credit, character, general reputation, lifestyle, rental history, civil and criminal court records; and other personal information.

I authorize LOSS REALTY GROUP (Landlord/Property Manager/Agent for Owner) to provide the following information to a consumer reporting agency for such purpose.

Please be advised that you have the right to request, in writing within a reasonable time, that we make complete and accurate disclosure of the nature and scope of the information requested. Such disclosure will be made to you within five (5) days of the date on which we receive the request from you or within five (5) days of the time the report was first requested, whichever is later. The Fair Credit Reporting Act gives you specific rights in dealing with consumer reporting agencies. You may request a summary of these rights from the Landlord/Property Manager.

By signing below, I acknowledge I have read the foregoing and understand this form. The cost of each credit report is: \$47.00.

MAIN APPLICANT: _____
Please Print Full Name

Previous Name(s): _____
Please Print Full Name (For Verification Purposes Only)

Current Address: _____
Street City State Zip Code

Date of Birth: _____ **SSN:** _____
(For Verification Purposes Only)

Applicant's Signature: _____

CO-APPLICANT: _____
Please Print Full Name

Previous Name(s): _____
Please Print Full Name (For Verification Purposes Only)

Current Address: _____
Street City State Zip Code

Date of Birth: _____ **SSN:** _____
(For Verification Purposes Only)

Co-Applicant Signature: _____

****If more than one (1) credit report is required – an additional \$47.00 fee will apply.**