



(314) 344-0084
Fax (314) 344-2998

WELCOME HOMES CREDIT SERVICES
3550 Mc Kelvey • Suite 210 • Bridgeton, MO 63044

RE:

TO WHOM IT MAY CONCERN:

Please be advised that the undersigned has authorized the disclosure of the following information:

LANDLORD INFORMATION

When did the account open:	Close:	What was the monthly payment?
Did the resident(s) pay promptly?	If no, explain	

Did the resident(s) give a thirty (30) day notice?

Were there any disturbances or property damage?

If yes, explain.

Did the resident(s) request a large number of work orders?

Is the undersigned currently past due?	Amount past due: \$
--	---------------------

Has the undersigned had any returned checks?	Number of returned items?
--	---------------------------

Has the undersigned had any late charges?	Number of late charges?
---	-------------------------

Number of times late - 5 days	30 days	60 days	90 days
-------------------------------	---------	---------	---------

Is there a co-resident signed on the lease?	Is the lease guaranteed by a co-signer?
---	---

Are the resident(s) currently receiving any housing subsidy?

Were there any unauthorized residents?

Would you re-rent to the resident(s)? If no, explain

EMPLOYMENT VERIFICATION

What date was the applicant hired?	If terminated, the date employment terminated
------------------------------------	---

What position does the applicant hold?

What is the applicant's monthly, yearly, hourly wage?	Full Time	Part Time
---	-----------	-----------

If part time, hours per week	Does the applicant currently have any garnishments?
------------------------------	---

CREDIT AND LOAN INFORMATION

What date was account opened?	What is the high credit?	The number and amount of payments #	Payments. x \$	The current balance?
how many payments were late, number of times over: x15,	x30,	x60,	x90,	x120.
When is the applicant next due?	Is this credit secured or unsecured?			

BANK REFERENCE

The undersigned authorizes the release of any and all information related to their deposit relationship. If the undersigned has any additional deposit relationships, please provide the following information.

Account #	Date Open	Type	Average Balance	Number of Times OD or NSF

We would appreciate your reply as soon as possible.

Thank you.

Sincerely yours,

AUTHORIZED BY:

X

APPLICANT'S SIGNATURE

X

SPOUSE'S SIGNATURE

RESIDENT MANAGER OR AUTHORIZED AGENT