

Request for Verification of Deposit

Instructions: Landlord—Complete items 1 through 7. Have applicant(s) complete item 8. Forward directly to depository named in item 1.
 Depository—Please complete items 9 through 15 and return DIRECTLY to landlord named in item 2.

Part I—Request

x 1. To (Name and Address of Depository)	2. From (Name and Address of Landlord) RICK KLIMEK 7620 BUCHANAN CT. MENTOR, OH 44060 Tel. (440) 953-8687 Fax (440) 953-8707	
3. Signature of Landlord/Manager	4. Title	5. Date

x 6. INFORMATION TO BE VERIFIED			
Type of Account	Account in Name of	Account Number	Balance
			\$
			\$
			\$
			\$

To Depository: I/We have applied to rent a dwelling and stated in the rental application that the balance on deposit with you is as shown above. You are authorized to verify this information and to supply the landlord identified above with the information requested in items 9 through 12. Your response is solely a matter of courtesy for which no responsibility is attached to your institution or any of your officers.

x 7. Name and Address of Applicant(s)	x 8. Signature of Applicant(s)

To Be Completed by Depository

Part II—Verification of Depository

9. Deposit Accounts of Applicant(s)				
Type of Account	Account Number	Current Balance	Average Balance for Previous Two Months	Date Opened
		\$	\$	
		\$	\$	
		\$	\$	
		\$	\$	

10. Bank Card Accounts of Applicant(s)				
Type of Bank Card	Account Number	Current Balance	Average Monthly Payment	Expiration Date
		\$	\$	
		\$	\$	

11. Loans Outstanding to Applicant(s)						
Loan Number	Date of Loan	Original Amount	Current Balance	Installments	Secured by	No. Late Payments
		\$	\$	\$ per		
		\$	\$	\$ per		

12. Please include any additional information which may be of assistance in determination of credit worthiness. (Please include information on loans paid-in-full in item 11 above.)

13. Signature of Depository	14. Title	15. Date
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The confidentiality of the information you have furnished will be preserved except where disclosure of this information is required by applicable law. The form is to be transmitted directly to the landlord and is not to be transmitted through the applicant(s) or any other party.

BANK/LENDING INSTITUTION: PLEASE COMPLETE AND FAX TO:
(440) 953-8707