STEP THREE

Employment Verification

PART ONE

TO EMPLOYER: _____ PHONE # _____

ATTN: _____

FROM: _____

CONCERNING: _____

EMPLOYEE SS# _____ EMPLOYEE BIRTH DATE _____

I have filled out a residential rental application and I give permission for my employer to verify employment and answer the following questions.

Signature _____ Date _____

PART TWO

Because time is a factor in our approving this employee's application, we would appreciate you completing this form and faxing it back to us as soon as possible, with supervisor's signature and date filled out. Our fax number is _____ _____ . If you cannot fax us, please call _____ and verify the information, then mail this entire letter back to us (for our records) at your earliest convenience to the address below.

Send to: _____

_____

_____

PART THREE

START DATE _____

OF HOURS WORKED PER WEEK _____

PAY RECEIVED (LIST HOURLY/SALARY) _____

EMPLOYEE'S CURRENT OCCUPATION? _____

EMPLOYEE COVERED BY HEALTH INS? Y/N

IS POSITION PERMANENT? Y/N

IS POSITION STABLE? Y/N

Information provided by: _____

Name _____ Title _____

Signature _____ Date _____

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