



PREVIOUS LANDLORD RELEASE

Date:

Current or Former Landlord:

Name of Community or Management Company

Contact Phone Number

Applicant:

Name

Address

Dear Sir/Madam:

Our resident selection criteria require us to verify certain information about the person(s) applying for residency at one of our communities. To comply with this requirement, we ask your cooperation in supplying information on the resident history of the applicant referenced above. This information will be used only in determining whether the person(s) can be accepted for admission.

Your prompt return of this information will be greatly appreciated. If you have any questions, please call me at (313) 574-2795.

Sincerely,

Office Manager

Joanna Williams
XLNC RESIDENCES

I hereby authorize the release of the requested information:

Signature of Applicant

Date