



Medallion Management, Inc.

834 King Highway • Suite 100 • Kalamazoo, Michigan 49001-2578
269 381-0350 • TTY 7-1-1 • FAX 269 381-3609
www.medallionmgmt.com

RENTAL HISTORY CHECK

PLEASE RETURN TO THIS ADDRESS WITHIN 7 DAYS:

Date: _____

COMMUNITY: _____

ADDRESS: _____

To: _____

PHONE: _____

FAX: _____

Dear Sir/Madam:

The person listed below has filed an application with us for housing.

Written permission has been given to release to this office, information regarding conduct, character, and past/present rental history. If the person listed below has rented from you or your agency, please complete the attached questionnaire and return it to our office.

If the person has not rented from you or your agency, please check the appropriate box below and return this form to our office.

Sincerely,
Medallion Management, Inc. for

Melissa Essex -Resident Manager
McKinley Apartments

Amy Kyser-Resident Manager
Port Crescent Apartments

APPLICANT CONSENT:

I hereby authorize the release of information on this date.

Printed Name

Signature

Date

Date of Birth

xxx-xx-_____
Social Security Number

Previous Address

City, State

Zip

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_____ Yes, the named above has rented from my agency.

_____ No, the named above has not rented from my agency.

1. Name Rented Under: _____

Rental Address: _____

Rented From-To (Dates): _____

2. How would you rate this applicant's housekeeping?

Excellent _____ Good _____ Fair _____ Poor _____

3. To your knowledge, were persons living with the applicant other than those listed on the lease?

4. In general, was the applicant's (and family's) conduct in accordance with your established Rules and Regulations?

5. How would you rate this applicant's rent paying habits?

Excellent _____ Good _____ Fair _____ Poor _____

6. Did you ever take judgment against this applicant?

Yes _____ No _____

7. What was the reason the applicant vacated the premises?

8. How would you rate the condition of the premises after the applicant vacated?

Excellent _____ Good _____ Fair _____ Poor _____

9. Does the applicant owe your agency any balance due for rent in arrears or damages?

Yes _____ No _____

10. If further information is required, may we call your office?

Name of person providing information

Relationship to Applicant

Address

Telephone No.

Signature

Date

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