

# LANDLORD ASSOCIATION OF PA

1414 Millard Street ■ Bethlehem, PA 18018  
Phone 610-867-8940 ■ Fax 610-867-8604  
Toll Free Phone 888-778-2173 ■ Toll Free Fax 888-329-5279

## APPLICANT BACKGROUND INVESTIGATION REQUEST

Member Name: \_\_\_\_\_ Member #: \_\_\_\_\_ Date: \_\_\_\_\_

Requested By: \_\_\_\_\_ Telephone: \_\_\_\_\_ Fax Number: \_\_\_\_\_

Applicant Name: \_\_\_\_\_

Current Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Soc. Sec. Num. \_\_\_\_\_ Birth Date: \_\_\_\_\_ DMV # / State: \_\_\_\_\_

### AUTHORIZATION and RELEASE

During the application process and at any time during any subsequent screening, I hereby authorize Landlord Association of PA or it's agents, on behalf of \_\_\_\_\_ to procure Background checks, which I understand may include information regarding my credit worthiness, credit standing, credit capacity, character, general reputation, personal characteristics, or mode of living. This report may be compiled with information from credit bureaus, court record repositories, criminal histories, department of motor vehicles, past or present employers, educational institutions, governmental occupational licensing or registration entities, business or personal references, and any other source required to verify information that I have voluntarily supplied.

\_\_\_\_\_  
Applicant's Signature

\_\_\_\_\_  
Date

### SELECT FROM THE FOLLOWING:

PA CRIMINAL RECORD CHECK

PA DRIVING RECORD CHECK

OTHER

STATES/COUNTIES\*\*\* \_\_\_\_\_

\*\*\*Call for pricing on other States

Price:		Turnaround Time:		Initial:	
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Authorized signature required to complete request:

\_\_\_\_\_  
Date

\_\_\_\_\_  
Member Signature

\*\*State fees and general fees subject to change without notice.