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Fostering Independence and Community - It's All Right Here

NOTIFICATION AND AUTHORIZATION FOR TENANT BACKGROUND CHECK

Para informacion en espanol, visite www.backgrounddecision.com/esp, o llame al (800) 332-9479.

I authorize Strategic Information Resources, Inc. to thoroughly investigate my personal history. I understand that the information supplied by me, regarding my: residence History, Employment History, Credit History, Criminal History, and References, will be utilized as part of the processing procedures. A background check will be conducted to verify the validity of the information submitted and will be utilized to develop information concerning my character, general reputation, personal characteristics, and mode of living. I acknowledge that these reports may be obtained at any time after receipt of my authorization and throughout the course of my rental agreement.

I am aware that in the event an investigative consumer report is prepared, I am entitled to request additional disclosures regarding the nature and scope of the investigation being requested as well as a written summary of my rights under the Fair Credit reporting Act.

I authorize and release from all liability, without reservation, the consumer reporting agency (CRA) and any law enforcement agency, administrator, state/federal agency, institution, information service bureau, employer, employee, insurance company or person gathering or providing information, to complete this investigation.

My signature below certifies that this authorization and the accompanying application and other documents were completed by myself and are complete and true to the best of my knowledge. This release will remain valid unless revoked in writing.

Copies and facsimile copies of this document may be accepted in lieu of the original.

Applicant Signature

Signature Date

Printed Name

Drivers License #

State

Social Security Number

Date of Birth*

Email Address

Current Address

City

State

Zip

Residence Dates (From – To)

Previous Address

City

State

Zip

Residence Dates (From – To)

Please list any aliases that you have used within the past seven years here. *(This may include **Maiden Names** or prior legal names)*

CA, OK, & MN Residents Only: check this box if you would like a copy of the background check results mailed to you:

*** Date of Birth is being requested in order to obtain accurate retrieval of records**