



**Salt River Pima-Maricopa Indian Community
Community Tribal Housing Program**

10005 East Osborn Road, Scottsdale, AZ 85256

P: (480) 362-RENT (7368) /F: (480) 362-6710 /E: HousingInfo@srpmic-nsn.gov

LANDLORD VERIFICATION

THIS SECTION TO BE COMPLETED BY APPLICANT

(Landlord/Property Manager)

Date: _____

TO: _____

RE: _____

Property
Address _____

(Print Applicant / Tenant name)

City, State / ZIP _____

Date of Birth: _____

I am an applicant for a housing program requesting verification of rental history. I authorize release of the information requested below for the purpose of determining program eligibility. Your timely response is essential and greatly appreciated.

Applicant/Tenant Please Sign and Date Below:

Sign/Date _____

Please provide this form to your current and/or former landlord/property manager and deliver with your completed application to:
Salt River Pima-Maricopa Indian Community
ATTN: CDD/Resident Resources & Services Division 10005 E.
Osborn Road
Scottsdale, AZ 85256
F: (480) 362-6710

THE FOLLOWING TO BE COMPLETED BY THE LANDLORD

To the best of my/our knowledge the following people and pets reside in the rental property. Please provide the household members and any pets to include type of pet that reside in the property:

Household Member	Household Member	Pet Name	Type of Pet
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

- 1) Are there any members of the household that have been removed from the lease within the last twelve (12) months? If "Y" please provide how many and their names below: ☐ Y ☐ N

Household Member

Household Member

Household Member

- 2) RENT: Total rent for this address is:

Total Rent P/Month

Rent is paid:

\$ _____ ☐ Monthly ☐ Weekly ☐ Other: _____

- 3) UTILITIES: Are utilities included in the Rent? If "Y", please provide the following information. ☐ Y ☐ N

Type of Utility

Amount P/Month

Type of Utility

Amount P/Month

- 4) Has the Residents had any late payments for rent and/or utilities? ☐ Y ☐ N

- 5) How long has the Residents resided at this property?

Move-In Date

Move-Out Date

Comments:

Landlord Signature: _____

Date: _____

Print Name & Title: _____

Phone
Number: _____

Address: _____

Email Address: _____