AUTHORIZATION FOR RELEASE OF INFORMATION FOR TENANT SCREENING PURPOSES

Background Screening Disclosure

I hereby authorize Info Cubic, LLC and its designated agents and representatives to conduct a comprehensive review of my background through a consumer report and/or an investigative consumer report to be generated for tenant screening purposes. I understand that the scope of the consumer report/investigative consumer report may include, but is not limited to, the following areas: criminal history records (from local, state, federal, international and other law enforcement agencies' records), sexual offender's lists, wants and warrants records, credit history, and civil/law suit cases. Upon Request, Info Cubic, LLC will supply a copy of the completed consumer report along with a copy of an individual's rights under the Fair Credit Reporting Act.

Authorization and Release

I,_____, authorize the complete release of these records or data pertaining to me which an individual, company, firm, corporation, or public agency may have. I hereby release Info Cubic, LLC, and its agents, officials, representatives, or assigned agencies, including officers, employees, or related personnel both individually and collectively, from any and all liability for damages of whatever kind, which may at any time, result to me, my heirs, family or associates because of compliance with this authorization and request to relapse. I certify that all information provided below and on my application is correct to the best of my knowledge. Any false statements provided in this form and my application will be considered just cause for disqualification at any time. This authorization and consent shall be valid in original, fax, or copy form.

The following information is required by law enforcement agencies and other entities for identification purposes when checking records. It is confidential and will not be used for any other purpose.

_____ _____
Applicant's Name (Print Legibly) Maiden/AKA/Previous Name(s)

_____ _____/_____/20_____
Signature Date

_____ -- _____ -- _____
Social Security Number

_____/_____/19_____
Date of Birth

_____ _____
Driver License Number State

_____
Current Address

(_____)_____
Phone