

•EMPLOYMENT VERIFICATION•



•APPLICANT'S EMPLOYMENT INFORMATION• PLEASE COMPLETE THIS ENTIRE TOP PORTION ONLY & SIGN

TO: _____ OF _____
CONTACT PERSON & TITLE CURRENT EMPLOYER/COMPANY NAME

E-MAIL ADDRESS PHONE # FAX #

I, PRINT APPLICANT/EMPLOYEE NAME CLEARLY hereby authorize **Chicago Apartment Place, Inc.** and its authorized agents to obtain information from my Employer to verify my Employment as I am applying for a unit located at PRINT RENTAL ADDRESS HERE

I agree that if my signature is submitted in electronic or digital format, and/or by facsimile or electronic copy, it shall be as valid as an original signature.

APPLICANT'S FULL SIGNATURE DATE (MM/DD/YEAR)

•FOR EMPLOYER ONLY•

We have received a Rental Application from the individual listed above, who has identified you as his/her employer. We would like to ask your cooperation by verifying his/her employment. Please answer the questions below and return to us as soon as possible via fax or e-mail.

The individual listed above is currently employed: Full-Time Part-Time Other: _____

Salary: \$ _____ per _____ # of hours per week _____ Date of Hire: _____

Job Title: _____

Probability of continued employment: _____

Comments (i.e. Bonuses/Commission, Etc.): _____

Completed By: _____
Print Name and Job Title Date & Sign

Return completed form to: FAX to 773-472-4738 or SCAN/E-MAIL to LEASING@CHIAPARTMENT.COM

•PHONE VERIFICATION• FOR IN-OFFICE USE ONLY

I, PRINT CHICAGO APARTMENT PLACE, INC. EMPLOYEE NAME certify that on DATE I contacted the above applicant's employer by telephone and confirmed the above information.

Chicago Apartment Place, Inc. Employee Signature