

## **APPLICANT FORM**

\*\*\* To be completed by individual or business whose credit is to be reported \*\*\*

AAA Credit Screening Services, L.L.C. 17041 El Camino Real, Suite 102 Houston, Texas 77058

Phone: (281)282-0447 Toll Free: 1-888-282-0447 E-mail: Reports@aaacredit.net Fax: (281)286-7128

APPLICANT Incomplete form may result in the decline of your application.						
First Name	Middle Initial	Last Name		Jr	., Sr., I, II, III	(Circle if applies)
Social Security No		_ Driver Lic.No./St	ate	_ Date of E	Birth (mm/dd/y	y)
Current Street Address		City			State	Zip
	Move Out Date _Rent \$					_Their
Home Phone ( )	Work Phone (	)	Income \$ _		🗆 Week [	□ Month □ Year
Previous Street Address		City			State	_ Zip
Move In Date	Move Out Date	Previous Landlo	rd/Mgr			Their
Phone	_Rent \$		_			
Current Employer & Address			_ Phone (	)	Occupation	
Hired Date	Termination Date	Monthly	Salary \$			
Previous Employer & Ad	dress		_ Phone (	)	Occupation	
Hired Date	Termination Date	Monthly	Salary \$			
I,		give my authorizat	ion to			
(Signature)				(Company Name or Landlord Name)		
	ng Services, L.L.C. to verify information (including salar					
Please circle one or	more of the following:					
Credit Report W/Score Crimi	inal Report Partial Tenant Sci	reen Full Tenai	nt Screen	Other		

Applicant: Please read before signing above. Application will not be processed without signature/s.: