

**Chaucer Court
Reference Checklist**

To:

From: Dave McCabe, Administrator
Chaucer Court 503-224-3559 FAX: 503-223-4666
1019 SW 10th Avenue, Portland, OR 97205

Date: _____

_____ has applied for residency at Chaucer Court. We are inquiring into the applicant's prior tenancy record. Please complete the following to the best of your knowledge and return at your earliest convenience in the enclosed, pre-paid envelope. Thank you for your cooperation - ALL INFORMATION WILL REMAIN CONFIDENTIAL.

1. Length of Tenancy: From: _____ To: _____
2. Relationship to Applicant: _____
3. Was rent paid on time: Yes No
4. Rent amount: \$ _____ Any outstanding money owed: \$ _____
5. Is the Applicant currently receiving subsidy: Yes No
6. Were there any disturbance problems related to Applicant: Yes No
If yes, please explain: _____

7. Were valid complaints lodged against them: Yes No
If yes, please explain: _____

8. Did you have reason to believe the Applicant to be:
A. Currently an illegal abuser or addict of a controlled substance
B. Convicted of the illegal manufacture of distribution of a controlled substance;
And / or
C. A direct threat to the health or safety of others.
Explanation: _____
9. If Applicant vacated your premises, was adequate notice given: Yes No
10. Was the unit kept in a safe and sanitary condition by tenant: Yes No
If no, please explain: _____
11. Was the unit damaged: Yes No
If yes, please explain: _____
12. Would you rent to Applicant again: Yes No
If No, please explain: _____
13. Comments: _____

Printed name of Landlord: _____ Signature: _____ Date: _____

To complete my application with the Chaucer Court, I authorize you to release the above information:

Applicant Signature: _____ Date: _____