

Authorization to Release Information Related to a Residential Lease Applicant

I, _____ and _____

have submitted an application to lease a property located at:

_____ Sheboygan, WI 53083

The landlord or landlord's representative who will verify information is:

Windward Cove, LLC
5106 Windward Court, Unit 1
Sheboygan, WI 53083
866.542.5851

propertymanager@windwardcovellc.com

gigi@windwardcovellc.com

Permission is given:

- (1) to my current and former landlords to release any information about my rental history to the above-named person;
- (2) to the above-named person to obtain a copy of my consumer credit report from any consumer credit reporting agency and to obtain information about me.

X _____
Prospective Tenant / Signed

Date

X _____
Prospective Tenant / Signed

Date