

Fred A. Smith Company  
730 24<sup>th</sup> Street, NW, Suite 19  
Washington, DC 20037  
Tel: 202-337-5080 / Fax: 202-337-0038  
rent@fasgmt.com

**REQUEST FOR VERIFICATION OF EMPLOYMENT**

Applicant Name: \_\_\_\_\_  
Current Address: \_\_\_\_\_  
Employer: \_\_\_\_\_  
Employer's Address: \_\_\_\_\_  
Employer's Telephone and Fax: \_\_\_\_\_ / \_\_\_\_\_  
Employer's Email: \_\_\_\_\_

**Notice: Read Carefully**

The Fair Credit Reporting Act requires that no investigative report be made on any consumer unless he/she has given written approval that such a report may be or has been requested, and he/she is informed that he/she has the right to ask for disclosure of the type of information being sought. As part of our application procedure, Fred A. Smith Company may make inquiries that can provide pertinent information concerning applicant's character, mode of living, and general tenantability. All information gathered as part of our tenant screening process is held in strict confidence.

I hereby give permission to Fred A. Smith Company to contact any credit bureau for credit information, as well as any reference listed on the application, including my past, current, or future employer, without further notice to the applicant.

Applicant's Signature: \_\_\_\_\_ Date: \_\_\_\_\_



**\*\*\*\*\*For Office Use Only\*\*\*\*\***

We have received a rental application from the above named person, which we understand you employ. In addition to verifying the information requested below, please furnish us with any other information that might assist us in processing their application. Thank you.

Dates of employment: From: \_\_\_\_\_ To: \_\_\_\_\_ Position Held: \_\_\_\_\_

Hourly rate: \$ \_\_\_\_\_ Hours per week: \_\_\_\_\_

How Paid: Daily / Weekly / Bi-weekly / Monthly

Or

Annual salary: \$ \_\_\_\_\_ Monthly salary: \$ \_\_\_\_\_

Person completing this form: \_\_\_\_\_  
Please Print Name

Signature: \_\_\_\_\_ Date: \_\_\_\_\_