EMPLOYMENT VERIFICATION

DATE:	
TO:	RE:
To Whom it May Concern:	
name/firm as their present employer	oplied for an apartment with us and has given your and the control of the control
Employer and/or Company Name: _	
Employee's Capacity or Position:	
Length of Employment:	Yearly Salary:\$
Likelihood of Continued Employme	ent:
I certifiy that the information above misrepresentations may disqualify n	•
	Signature of Employer/Representative
	Please print name
	Date Signed
Applicant's Consent: I give permiss Windsor Properties.	ion to provide the above information to
	Applicant's Signature