

The Housing Group Real Estate	Agent:
300 S. Glynn Street Suite A	Agent Phone:
Favetteville, GA 30214	Agent Email:

Rental Consent to Contact References and Perform Credit Check

I authorize	to obtain info	btain information about me from my credit sources, current and previous		
landlords, emp	loyers, and personal references,	to enable to e	evaluate my rental	
application.				
I give permissi	on for the landlord or its agent to	o obtain a consumer report about me	for the purpose of this	
application, to	ensure that I continue to meet th	e terms of the tenancy, for the collec	ction and recovery of any	
financial obliga	ations relating to my tenancy, or	for any other permissible purpose.		
Applicant Sign	ature	Applicant Signature		
Printed Name		Printed Name		
Address:		Address:		
		-		
Phone Number		Phone Number		
Date		Date		



