

Date: _____

Request for a Copy of My RentBureau Rental File

Full Name: _____

Other name(s) used for credit: _____

Social Security Number: _____

Would you like the first 5 digits of your Social Security Number masked in your Resident File disclosure? YES NO

Phone Number: _____

Full Current Address: _____

Prior Addresses: _____

Date of Birth: _____

For identification purposes and faster processing, please fax a copy of your photo ID and a copy of an utility bill in your name billed to an address provided on this sheet along with your request form.

Signature: _____

All RentBureau Rental File requests will be mailed to the address provided on this sheet.

Mail or fax this form to:

RentBureau, LLC • P.O. Box 18706 • Atlanta, GA 31126 • Fax: 404-812-4111 • Phone: 877-703-7368