RECEIPT FOR SCREENING CHARGE

TENANT(S): _____ DATE:_____
RENTAL ADDRESS: _____ UNIT: _____
CITY: _____ STATE: _____ ZIP: _____

AMOUNT OF SCREENING CHARGE: $_____

The Applicant Screening Charge is non-refundable. However, if we fill the vacant rental unit(s) before screening your application or do not conduct screening of your application, we will refund the screening charge to you at your current address as indicated above.

Date:_____

_____
Landlord/Owner/Agent

PREVIEW ONLY

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