City of Dubuque

Prospective Tenant Background Check Consent Form

Email to: DLECrecords@cityofdubuque.org or Fax to: 563-587-3849

Last Name | **First Name** | **Middle Name**

Any Other Names Used | **Phone Number(s)**

Date of Birth | **Biological Sex** | **Gender Identity** | **Social Security Number**

Current Address: _____

Three (3) Prior Addresses (Include City, State, Zip)

1. _____
2. _____
3. _____

► **Additional household members eighteen (18) years or older:** (Name, Date of Birth)
(Additional household members eighteen (18) years or older must also complete a Prospective Tenant Background Check Consent Form)

1. _____ 3. _____
2. _____ 4. _____

Number of household members under eighteen (18) years of age: _____

Have you been *convicted* of a felony or a serious or aggravated misdemeanor in the past five (5) years? _____

I hereby consent to the use of the above information to search my ***criminal history records.*** I am of legal age and sign this as my own free act and deed. I understand what this document means and what I am agreeing to by signing it.

Signature | **Date**

DISCLAIMER: This information is being provided at the request of Landlord, and in accordance with the written instructions of the individual to whom it relates, and Landlord agrees that the decision to rent is Landlord's SOLE decision. The city of Dubuque is not an agent of Landlord nor does it guarantee or warrant the character or suitability of a tenant. The city is simply providing information requested.

To be Completed by Landlord

Property Agent

Name of Property

Property Address (Include Apt. #)

#of Bedrooms | Fax / Email

Phone # | Date

RESULTS

For Internal Use by City Only

Form Received by:	Date:	Check Completed by:	Date: