



## **RELEASE AUTHORIZATION**

I CERTIFY that the answers given herein are true and complete to the best of my knowledge. I authorize investigation and verification of all statements and information contained in this application, including re-verifying employment, income declarations, residence verification and pet references. I understand that this information will be used for tenant screening purposes to make a leasing decision by the Landlord(s) and Above All Property Management. I understand that the landlord may terminate any rental agreement or the application process for any misrepresentations made in the rental application.

Applicant Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Co-Applicant Signature: \_\_\_\_\_ Date: \_\_\_\_\_

The undersigned grants permission to Above All Property Management, their employees and assignees to investigate and obtain the applicant's and/or co-applicant's credit history, criminal background and sex offender background check AND proposed occupants 18 years of age or older, criminal background and sex offender background check. The undersigned also grants permission for Above All Property Management to verify all information on the rental application that includes employment, income, debt, housing and personal and pet references and communicate such findings to the Landlord. **This is an application for rental and NOT an agreement to lease.** Other applicants may be applying for the same property at this time. The property owners will select ONE tenant. By signing below, the applicants additionally acknowledge that once the application process begins, the application fee is earned whether you lease this property or not.

**\*\*The application processing fee is NOT REFUNDABLE.\*\***

Applicant Name (print): \_\_\_\_\_

Applicant Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Co-Applicant Name (print): \_\_\_\_\_

Co-Applicant Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Adult Occupant Name (Print): \_\_\_\_\_

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Adult Occupant Name (Print): \_\_\_\_\_

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

This release authorization MUST BE INK SIGNED and delivered with the COMPLETED rental application. If rental application was done online, this form MUST BE INK SIGNED and emailed to [rentals@aboveallpm.com](mailto:rentals@aboveallpm.com) immediately. The non-refundable application fee can be paid for online when submitting an online application. If you are hand delivering an application, the non-refundable application fee must be EXACT CASH (We DO NOT carry change at our office) or MONEY ORDER only. NO personal checks will be accepted. Above All Property Management does not make change. Please contact Above All Property Management to confirm receipt.

**Office Address:** Above All Property Management, 51 Kilmayne Drive, Ste. 100, Cary, NC 27512

**Phone:** 919-341-9555 **Email:** [rentals@aboveallpm.com](mailto:rentals@aboveallpm.com)

**Business Hours:** 9:00am to 3:00pm Monday thru Friday