

PROPERTY MANAGEMENT REPORT

MEMBER INFORMATION

COMPANY NAME	*DATE REPORTED
PROPERTY LOCATION	PHONE
	FAX
*AUTHORIZED SIGNATURE	

RENTER INFORMATION

RENTER	SS#		
STREET	CITY	STATE	ZIP
CURRENT ADDRESS			
STREET	CITY	STATE	ZIP
PREVIOUS ADDRESS			
STREET	CITY	STATE	ZIP

CO-RENTER INFORMATION

CO-RENTER	SS#	
LAST	FIRST	MI
CO-RENTER	SS#	
LAST	FIRST	MI

CIRCLE ONE MOVE IN UPDATE MOVE OUT SKIP EVICTION

*TYPE (I/J)	*MOVE IN DATE	*MONTHLY RENT \$
LEASE AMOUNT \$	*PAYMENT STATUS \$	
LEASE EXPIRATION DATE		
NSF AMOUNT \$	*BALANCE \$	PAST DUE \$
MOVE OUT DATE	LEASE STATUS	
COMMENTS:		

Johnstown Credit Bureau, Inc.
227 Franklin Street , Suite 306
Johnstown, PA 15901
Ph: (814) 535-2513
Fax: (814) 535-3364

LANDLORD CHECKLIST

<input type="checkbox"/>	FAILURE TO PAY RENT AMOUNT - DATE OF LAST PAYMENT ALONG WITH PROOF
--------------------------	---

<input type="checkbox"/>	MOVING WITHOUT NOTIFICATION - LAST KNOWN ADDRESS
--------------------------	---

<input type="checkbox"/>	DAMAGES - LIST OF DAMAGES ALONG WITH PROOF
--------------------------	---

<input type="checkbox"/>	CRIMINAL CONDUCT - LIST OF CHARGES/COMPLAINTS ALONG WITH PROOF
--------------------------	---

<input type="checkbox"/>	FAILED TO PAY UTILITIES IN FULL - ATTACH COPIES OF BILLS
--------------------------	---

<input type="checkbox"/>	OTHER LEASE VIOLATIONS - INCLUDE LEASE
--------------------------	---