

**EMPLOYMENT VERIFICATION**

|      |  |       |            |
|------|--|-------|------------|
| To:  |  | From: | Processing |
| Fax: |  | Date: |            |

(ASC unit applied for): \_\_\_\_\_

**I hereby authorize disclosure of this information to Apartment Savvy Chicago.**

Applicant signature: \_\_\_\_\_ SSN: \_\_\_\_\_  
 Printed name: \_\_\_\_\_ Date: \_\_\_\_\_  
 Employer: \_\_\_\_\_

**Applicant, Do Not Write Below This Line**

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**Employer, please fill out in order to complete employee's rental application.**

Monthly gross earnings: \_\_\_\_\_  
 Position / title: \_\_\_\_\_  
 Start date: \_\_\_\_\_  
 Probability of continued employment: \_\_\_\_\_

Verified by: \_\_\_\_\_  
 Signature: \_\_\_\_\_  
 Title: \_\_\_\_\_ Date: \_\_\_\_\_

**Fax this form back to Apartment Savvy Chicago: 773.348.8931.**

**Thank you!**

