

EMPLOYMENT VERIFICATION REQUEST

NAME OF APPLICANT: (*) _____

SOCIAL SECURITY NO.: (*) _____

The above noted individual has applied for a lease with Abbey Residential Management in Boston, Massachusetts. Please provide us with the necessary information on the spaces provided below and return this form to us as soon as possible. Thank you for your cooperation.

COMPANY NAME: (*) _____

COMPANY HR CONTACT: (*) _____

COMPANY ADDRESS: (*) _____

COMPANY PHONE #: (*) _____

POSITION: _____

SALARY AMOUNT: _____

INFORMATION PROVIDED BY: _____

Please release the above requested information to Abbey Residential Management, LLC. Your prompt attention will be greatly appreciated.

(*) _____

Signature of applicant

(*) To be filled in by applicant