City of Dubuque
Prospective Tenant Background Check Consent Form

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

Fair Credit Reporting Act:
https://files.consumerfinance.gov/f/201504_cfpb_summary_your-rights-under-fcra.pdf

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

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

Date of Birth | **Gender** | **Social Security Number***
***Required to process**

Current Address (include City, State & Zip)**:**

Prior Address (Include City, State, & Zip)**:**

Additional household members eighteen (18) years or older: (Name and 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: _____

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. The department reserves the right to not disseminate date if a person's identity cannot be confirmed. If additional information is needed to confirm an identity, the form may be returned for extra identifiying information.

To be Completed by Landlord:

Property Agent

Name of Property

Property Address (Include Apt. #)

Fax/Email:

Phone # | Date

RESULTS