

APPLICANT NAME: _____
ADDRESS: _____
TEL: _____

DATE: _____

CURRENT/PREVIOUS LANDLORD: _____
ADDRESS: _____
UNIT RENTED: _____
TEL: _____
EMAIL: _____

Dear Sir/Madam,

RE: AUTHORIZATION

I/We hereby authorize you to release my/our rental history at your property to Safari Asset Management LLC, 301 West Platt St #244, Tampa FL 33606; Tel (813) 586 3170; Email info@safariasset.com. Thank you.

Yours truly,

Applicant