TENANT SCREENING CENTER

Verify Before You Trust

6570 Oakmont Drive, Suite 100 A
Santa Rosa, CA 95409

PHONE: 707-578-5533 or 800-523-2381
FAX: 707-544-8861 OR 800-799-8861
Email: info@tsci.com – Web: www.tsci.com

COVER SHEET REQUEST FORM

Important: All information must be completed in its entirety. Please print clearly and legibly to ensure accurate and timely processing.

DATE: _____ YOUR ACCOUNT #: _____

NAME ON ACCOUNT: _____ REQUESTED BY: _____

E-MAIL ADDRESS: _____ PHONE #: _____ CELL PHONE #: _____

METHOD OF PAYMENT:

☐ USE CREDIT CARD ON FILE
☐ NEW CREDIT CARD INFORMATION: ACCOUNT HOLDERS CREDIT CARD INFORMATION ONLY
CREDIT CARD#: _____ - _____ - _____ - _____ EXPIRATION DATE: _____ / _____
NAME ON CC: _____

****REPORT DELIVERY METHOD AND TYPE****

☐ **ONLINE ORDER: FILE(S) #: _____ -_____ - _____ - _____ - _____**
**** PLEASE ATTACH AND SEND THE SIGNED AUTHORIZATION FOR ALL ONLINE ORDERS****

☐ **FAXED BACK: _____**

☐ **E-MAILED BACK: _____**

*****NOTE-TSC CANNOT PROCESS ANY REQUESTS WITHOUT A SIGNED RENTAL APPLICATION*****

☐ **SCORECARD:** PASS/FAIL REPORT – LIMITED CREDIT INFORMATION

☐ **CREDIT ONLY:** INCLUDES: COMPLETE CREDIT REPORT – PLUS CREDIT SCORE – PLUS CREDIT PROFILE SUMMARY (INCLUDES 17 SIGNIFICANT CALCULATIONS)

☐ **MINI REPORT:** INCLUDES: COMPLETE CREDIT REPORT – PLUS CREDIT SCORE – PLUS CREDIT PROFILE SUMMARY (INCLUDES 17 SIGNIFICANT CALCULATIONS) - UNLAWFUL DETAINER SEARCH (EVICTION)

☐ **FULL ONLY:** MINI REPORT PLUS VERIFICATION OF EMPLOYER (INCLUDED IF EMPLOYER CHARGES VERIFICATION FEE) VERIFICATION OF PRESENT AND PREVIOUS LANDLORD

☐ **NATIONAL DATACHECK:** NATIONAL INFORMATION REGARDING: CRIMINAL AND EVICTION HISTORY AS WELL AS ADDRESS AND SOCIAL SECUITY VERIFICATION

☐ **CRIMINAL:** COUNTY(S) TO SEARCH: _____
** (DATE OF BIRTH IS REQUIRED ON ALL CRIMINAL SEARCHES) **

☐ **BUSINESS:** CREDIT INFORMATION ON THE BUSINESS - STATE VERIFICATION OF THE BUSINESS MINI REPORT (ON ONE PRINCIPAL)

*****PLEASE PRINT CLEARLY THE NAME(S), SOCIAL SECURITY NUMBER(S), AND DATE(S) OF BIRTH(S) OF THE APPLICANTS TO BE RUN******

APP 1: _____ SS#: _____ / _____ / _____ DOB: _____

APP 2: _____ SS#: _____ / _____ / _____ DOB: _____

APP 3: _____ SS#: _____ / _____ / _____ DOB: _____