



Date: _____

First name: _____ Middle name/initial: _____ Last name: _____ Generation (SR, etc.): _____

Other name(s) used for credit: _____

Date of birth: _____ Social Security number: _____

Phone number(s): _____

Current mailing address: _____ Apt: _____

City: _____ State: _____ ZIP code: _____

Previous address: _____ Apt: _____

City: _____ State: _____ ZIP code: _____

For identification purposes and faster processing, proper identification is required. Please mail a copy of your photo ID and a copy of a utility bill in your name billed to an address provided on this sheet along with this request form.

Signature: _____ Date: _____

All RentBureau Rental File requests will be mailed to the address provided on this sheet.

contact information

Mail this form to P.O. Box 26, Allen, TX 75013; or call us at 877 704 4519.