

BANK REFERENCE FORM

FINANCIAL INSTITUTION:
AGENT NAME:

FROM: JO BAUMANN, Manager/Executive Assistant

PHONE: (515) 290-9999

Mail to: 20354 KK Ave., Iowa Falls, IA 50126 (Applicant may return in person)

Email: jobaumann@me.com

DATE:

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Applicant's Name:

Applicant's SS #:

Checking Account #:

Loan Account #:

The above person has submitted an application to Jo Baumann, Manager and Executive Assistant for Scott and Sheila Riggs to live in one of our units. He/She has listed your bank as their credit reference. This person has signed this form giving you the authorization to release the following information.

BANKING AGENT: Please answer the questions below and return promptly. Thank you!

- 1.) Does this person have an account with your bank? Type of Account?
- 2.) Does this person have a loan with your bank?
 - a.) Does this person make loan payments on time?
- 3.) How long has this person had an account with your bank?
- 4.) Does this person have a history of repeatedly going into overdraft? If yes, how many times within the last year?

I authorize _____ (financial institution) to release information about my account/credit history; which will facilitate my gaining approval to lease from Scott and Sheila Riggs.

Applicant Signature

Print Your Name Here

Date

SIGNATURE OF BANKING AGENT PROVIDING INFORMATION

DATE

Position of Agent and Phone Number

Banking Agent Please Use your stamp after completing this form.

This information may be mailed, emailed or phoned to the above numbers.

Thank you,
Jo Baumann