AFFIDAVIT OF LANDLORD/HOMEOWNER

City:	State: Z	ip Code:
The above property is cu	rrently rented or leased to:	
(Tenan	t Name)	
This rental/lease commenced on:		, 20
This rental/lease expires on:		, 20
The information above is	true to the best of my knowl	ledge and belief.
(Landlord/Homeowne	r Name: Please Print)	(Date)
(Landlord/Homed	owner Signature)	
Phone: ()		
te: Additional information may be r	equired from Landlord/Homeowner	
	ument must be notarized and ement forms will be accepte	d must have original seal. ed in the place of this document.
(Notary Public)		
(Notary Public) (Type or Printed Notary Name)		

(Official Notary Seal/Stamp)