



EMPLOYMENT VERIFICATION

TO (Company Name):					
ATTN: Fax # (to):					_
The applicant listed below has applied for an apartment at our community, the Creekside Villas. Please fill out this form and return to us via Fax at (330) 319-8990, or via Email at CVmanager@GranitePMC.com. If you have any questions, please call a (330) 526-6910. Thank You.					
Applicant Name			Social Secur	ity Number	
My signature below authoriz	zes you to release this i	information			
Applicant Signature			Date		
Current or former employee:	Current	Former _			
Employment Dates	From:		To:		
Position:					
Base Pay (enter amount in app	olicable period):				
Hourly: \$	Weekly: \$		Monthly: \$		
YTD Earnings: \$		Other: \$			
Overtime: \$	Commissions: \$		Bonus: \$		
Probability of Continued Emp	loyment				
Please list any additional co	omments below:				
Signed		_ Title:			
Please Print Name				Office Use Only Ve	
Phone #	Date	<u> </u>		Date	
	Date			Spoke To	
				Ву	