

Board of County Commissioners, Broward County, Florida
HUMAN SERVICES DEPARTMENT
FAMILY SUCCESS ADMINISTRATION DIVISION
Tenant Verification/Confirmation Form

_____ has been my tenant since _____
(Tenant Name) (Date)

He / She pays \$_____ for the monthly rent of the property.

The rental unit (please circle one): **is an efficiency / has** ___ **bedroom (s)** and it is located at:

I know the following people reside at this address with the above named tenant:

_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____

Complete this section if applicable only

The following people moved out from this address:

_____	_____
Name	Date moved out
_____	_____
Name	Date moved out

I may be contacted at the following numbers regarding this matter:

Landlord's Name: _____ Business name (if different): _____

Landlord's Address: _____

Telephone #: _____ Fax #: _____ Email: _____

Landlord's Signature: _____ Date: _____