

Pestorich Holdings LLC

Employment Verification Request

TO BE COMPLETED BY OFFICE:

To: _____ Date: _____
Fax Number: _____ Phone Number: _____
From: Pestorich Holdings LLC
Re: Lease Applicant: _____

TO BE COMPLETED BY APPLICANT:

I, _____, hereby authorize release of the information requested below.

Applicant Signature: _____ Date: _____

TO BE COMPLETED BY EMPLOYER:

The lease applicant referenced above has applied to lease a property from Pestorich Holdings LLC, and listed your company as a current employer. Please provide the following authorized employment verification information required by us in order to lease this property to your employee.

Beginning date of employment: _____

Monthly Gross Income: _____

Position currently held: _____

Other relevant information: _____

Title of person completing form: _____

Signature: _____

Printed name: _____

Date: _____

Please return this form as soon as possible to:

Pestorich Holdings LLC
Fax: (559) 256-7730
applications@pestorich.com