

Employment Verification Request

I hereby authorize my current and/or previous employer to furnish the employment information requested below.

Applicant Signature: _____ Date: _____

Applicant Do Not Write Below This Line

Date: _____

To: _____ Fax: _____ Phone: _____

From: _____ Fax: _____ Phone: _____

Name of Employee: _____ **SSN:** _____

has applied for residency in one of our apartments. Please complete the requested information below and fax this form back to us at your earliest convenience.

Employer's Name: _____

Employee Position/Title: _____

Dates of Employment From: _____ To: _____

Income Hourly/Weekly/Monthly: _____ Average Hours Per Week: _____

Expectation of future employment: _____

I am the Authorized Representative from the above organization to certify the employment information requested.

Authorized Representative Printed Name

Authorized Representative Signature

Title

Date

***Please fax or email completed form to (773) 728-9901 or info@winnemacproperties.com.
Thank you for your prompt response.***

4818 North Damen Avenue, Chicago, IL 60625

Phone: (773) 728-9900 Email: info@winnemacproperties.com