



City of Dubuque Prospective Tenant Background Check Consent Form

ast Name	First Name		Middle Name
Any Other Names Used			Phone Number(s)
Date of Birth	Biological Sex	Gender Identity	Social Security Number
Current Address:			
Three (3) Prior Addresse	•s (Include City, State, Zip))	
1			
_			
► Additional household	members eighteen (18)	years or older: (Name	Date of Birth) e Tenant Background Check Consent Form)
1		3	
2			
Number of household me		<u> </u>	
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