

Background Screening Report

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FILE NUMBER REPORT TO	100001 Your Company Name (12345) South Haven, MI 49090	REPORT DATE ORDER DATE TYPE	04-13-2015 04-13-2015	Super Agent
	Phone: 269-555-1212 Fax: 269-555-1212			

Application Information									
APPLICANT	CONSUMER, JOHN		SSN	-	DOB	09-26-1977			
ADDRESS(ES)	2619 BEDSIDE RD		CITY / STATE / ZIP	BENTON H	ARBOR, MI 490	22			
		Instant Driv	ving Records						
RESULTS STATE OF ISSUE NUMBER A1234	License Found Michigan ^{LICENSE} 45678987		SEARCH DATE	04-13-2015	12:58 PM MDT				
License Nu License Sta Full Name: DOB: Gender: Address:	ate:	A12345678987 MI CONSUMER, JOHN 1977-09-26 M 2619 BEDSIDE RD BENTON HARBOR, N	1I 49022-9580						
License Ir	nfo								
Status:		ELIGIBLE - RECO	rd Clear						
License Type:		OPERATOR							
Class:		OPERATOR 2016-11-13							
Expiration Date: Issue Date:		2010-11-13 2012-10-18							
Other Lice	ense Info								
Report Message:		NO REPORTABLE DRIVING HISTORY ENTRIES							
MVR Status:		MVR found							
MVR Sco		An invalid driver li			suspended, revo	oked, etc), or			
an MVR	with less than 3 years	history (or unknown)	, or a not clear	MVR. (1)					

Messages

DRIVER LICENSE RENEWED BY MAIL DRIVER LICENSE APPLICATION RENEWAL LICENSE VALID

WARNING: Confidential Information - To Be Used As Per State And Federal Laws. Misuse May Result In A Criminal Prosecution.