



Lease Payment Information Form

Please complete this form if the Company is making payments on behalf of the assignee or if this lease is for a rental property outside of the US. This helps the company organize to make the payments. Please return to your IOR Destination Program Manager with the lease document.

Name of Tenant for this lease:		
Employer:		
Property address:		
Length of lease:	Starts on:	Ends on:
Name of Landlord or Property Management Company:		
Landlord Phone:	Landlord email:	
Transfer clause	Yes	No
Days notification required:		

Rental property is	Apartment	Hous	Condo/ Townhouse
Tenant expects to move into property on:	Keys will be available at:		

Monthly Rent	Amount of increase
Security Deposit	Rent increases on
Pet Deposit	Commission amount owed:
Pro rate @ \$ per day	
TOTAL DUE:	Who makes initial payments:
First Month Rent and Security Deposit Due Date:	When ongoing payments are due:

IF WIRE TRANSFERRING FUNDS (ACH PAYMENT IF IN U.S.):
Monthly Rent Payment Portal Required?:
Account holder's name:
Bank name, Address and Phone number:
Account #:
ABA/Routing # (US only):
Bank Code (International):
Branch Code (International):
IBAN/SWIFT CODE (International) :
IF SENDING CHECK: Cashier's check or Corporate check acceptable? If more than one check required, please see below
Check #1 payable to:
Mailing Address:
Work phone:
Email:
Check #2 payable to:
Mailing Address:
Work phone: