## PACIFIC PARTNERS PROPERTY MANAGEMENT

1036 5<sup>th</sup> STREET, SUITE A P.O. BOX 31 EUREKA, CA 95502

707-441-1315 TEL 707-441-9340 FAX cbcpacificpartners.com

## CO-SIGNER AGREEMENT AND APPLICATION

	/		/	
NAME		HOME PHONE #	DATE OF BIRTH	
HOME STREET ADDRESS		CITY	STATE /	ZIP CODE
OWN?RENT?IF R	ENTING, LANDLORI	)	]	PHONE #
OCIAL SECURITY NUMBER		DRIVER'S LICENSE NUMBER  / STATE		
EMPLOYER	<del></del>	HIRE DATE	WORK#	
EMPLOYER ADDRESS		CITY	STATE /	ZIP CODE
POSITION	N SALAR		PER	
ANY OTHER INCOME?	SOURCE?RELATIONSHIP TO APPLICATIONS		PLICANT	
BANK	BRANCH_		ACCOUNT #_	
***********				
		HOME PHONE # DATE OF BIRTH		
HOME STREET ADDRESS		CITY	STATE /	ZIP CODE
HOME STREET ADDRESS  OWN?RENT?IF R		CITY	STATE	ZIP CODE
HOME STREET ADDRESS  DWN?RENT?IF RI  SOCIAL SECURITY NUMBER		CITY	STATE STATE	ZIP CODE PHONE #  STATE
HOME STREET ADDRESS  DWN?RENT?IF RI  SOCIAL SECURITY NUMBER  EMPLOYER		CITY  DIVER'S LICENS	STATE  STATE  E NUMBER  WO	ZIP CODE PHONE # /_ STATE  DRK #
HOME STREET ADDRESS  DWN?RENT?IF RI  SOCIAL SECURITY NUMBER  EMPLOYER  EMPLOYER ADDRESS		CITY  DIVER'S LICENS  HIRE DATE  / CITY	STATE  STATE  E NUMBER  WO	ZIP CODE PHONE # /_ STATE  DRK #
NAME SECOND COSIGNER/SPOUS HOME STREET ADDRESS DWN?RENT?IF RI SOCIAL SECURITY NUMBER EMPLOYER EMPLOYER ADDRESS POSITION ANY OTHER INCOME?	ENTING, LANDLORI	CITY  DIVER'S LICENS  HIRE DATE  / CITY	STATE  E NUMBER  WO  STATE  PER	ZIP CODE PHONE # / STATE  DRK #  ZIP CODE

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## CO-SIGNER AGREEMENT AND APPLICATION

COSIGINING FOR:
RELATIONSHIP TO APPLICANT:
ADDRESS APPLYING FOR:
I AUTHORIZE LANDLORD OR HIS AUTHORIZED AGENTS TO VERIFY THE ABOVE INFORMATION, INCLUDING
BUT NOT LIMITED TO OBTAINING A CREDIT REPORT AT APPLICANTS EXPENSE (CURRENT CHARGE IS
\$20,00) AND IF THIS APPLICATION IS ACCEPTED, I AGREE TO EXECUTE THE RENTAL AGREEMENT AND/OR
PERSONAL GUARANTEE OF RENT. IT IS UNDERSTOOD THAT THIS APPLICATION BECOMES THE PROPERTY
OF PACIFIC PARTNERS PROPERTY MANAGEMENT ONCE IT IS SUBMITTED AND WILL NOT BE RETURNED TO
APPLICANT.
THE UNDERGIANED ACKNOWLEDGES THAT HE HAS BEAD THE EQUEGONIC ACREEMENT AND
THE UNDERSIGNED ACKNOWLEDGES THAT HE HAS READ THE FOREGOING AGREEMENT AND
UNDERSTAND ITS TERM; THAT THIS AGREEMENT IS BEING EXECUTED TO PERSONALLY GUARANTEE THE
PAYMENT OF ANY MONETARY DAMAGES SUFFERED BY OWNER AND HIS AGENT(S), INCLUDING BUT NOT
LIMITED TO, RENT, CLEANING FEES, PROPERTY DAMAGE, AND ACTUAL ATTORNEY'S FEES INCURRED IN
THE ENFORCING OF SAID AGREEMENT AND GUARANTEE; THAT THE UNDERSIGNED IS NOT OCCUPYING
THE SAID PREMISES AND IS NOT ENTILTED TO SERVICE OF ANY OF THE STATUTORY NOTICES REQUIRED
BY LAW TO BE PROVIDED OCCUPANTS. THE UNDERSIGNED FURTHER ACKNOWLEDGES THAT SAID
AGREEMENT WILL REMAIN IN FORCE THROUGHOUT THE ENTIRE TERM OF SAID TENANT'S TENANCY; AND
SAID AGREEMENT WILL BECOME AN INTEGRAL PART OF RENTAL AGREEMENT AND ANY CHANGES OF
TERMS TO RENTAL AGREEMENT.
SIGNATURE DATE_
SIGNATURE DATE
***************************************

CO-SIGNER APPLICATION AND AGREEMENT PAGE 2 OF 2