



GUARANTOR FOR: _____
(APPLICANT)

Please Tell Us About Yourself (use additional sheets if necessary)

FIRST NAME		MIDDLE NAME		LAST NAME	
SOCIAL SECURITY # OR INDIVIDUAL TAXPAYER ID #		DRIVERS LICENSE OR OTHER GOVERNMENT ISSUED PHOTO ID #		TYPE OF ID	STATE OR GOVERNMENT THAT ISSUED THE ID
DATE OF BIRTH		OTHER NAMES USED IN LAST 10 YEARS		EMAIL ADDRESS	
PRESENT ADDRESS			COUNTY	WORK TELEPHONE #	
CITY	STATE	ZIP	HOME TELEPHONE #	MOBILE TELEPHONE #	
PRESENT ADDRESS IS (Check one): <input type="checkbox"/> OWNED HOME <input type="checkbox"/> RENTED HOME <input type="checkbox"/> RENTED APARTMENT <input type="checkbox"/> PARENTS' HOME <input type="checkbox"/> STUDENT HOUSING <input type="checkbox"/> OTHER:					
IF RENTING: PRESENT LANDLORD OR APARTMENT COMMUNITY / IF OWNED: NAME OF MORTGAGE COMPANY				FROM:	TO:
ADDRESS OF PRESENT LANDLORD / APARTMENT COMMUNITY / MORTGAGE COMPANY					
CITY	STATE	ZIP		TELEPHONE #	
HOW LONG?	MONTHLY PAYMENT	ANTICIPATED MOVE-OUT DATE:		REASON FOR LEAVING:	
PREVIOUS ADDRESS (IF LESS THAN TWO YEARS AT PRESENT ADDRESS) (Check one): <input type="checkbox"/> OWNED HOME <input type="checkbox"/> RENTED HOME <input type="checkbox"/> RENTED APARTMENT <input type="checkbox"/> PARENTS' HOME <input type="checkbox"/> STUDENT HOUSING <input type="checkbox"/> OTHER:					
IF RENTING: PREVIOUS LANDLORD OR APARTMENT COMMUNITY / IF OWNED: NAME OF MORTGAGE COMPANY				FROM:	TO:
ADDRESS OF PREVIOUS LANDLORD / APARTMENT COMMUNITY / MORTGAGE COMPANY					
CITY	STATE	ZIP		TELEPHONE #	
HOW LONG?	MONTHLY PAYMENT	MOVE-OUT DATE:		REASON FOR LEAVING:	
NAME OF PERSONAL REFERENCE			RELATIONSHIP		
ADDRESS					
CITY	STATE	ZIP	TELEPHONE #		

Please Tell Us About Your Job

EMPLOYER (COMPANY NAME)		HOW LONG?	MONTHLY GROSS INCOME	
ADDRESS		CITY	STATE	ZIP
JOB TITLE		SUPERVISOR'S NAME		SUPERVISOR'S TELEPHONE #
OTHER SOURCE(S) OF INCOME	WHEN RECEIVED	AMOUNT	MONTHLY INCOME FROM OTHER SOURCES	
FORMER EMPLOYER (IF LESS THAN TWO YEARS AT CURRENT JOB)		HOW LONG?		
ADDRESS		CITY	STATE	ZIP
JOB TITLE		SUPERVISOR'S NAME		SUPERVISOR'S TELEPHONE #

PLEASE READ CAREFULLY AND SIGN BELOW

Correct Information—Guarantor represents that all of the above statements are true and complete. Guarantor hereby authorizes verification of the above information, references and credit records, and releases from all liability or responsibility all persons and corporations requesting or supplying such information. Guarantor acknowledges that false, incomplete or misleading information herein may constitute grounds for rejection of this application, termination of right of occupancy of all occupants under the contemplated lease, and may constitute a criminal offense under the laws of this State.

I/We have read and agree to the provisions as stated.

Date _____

Guarantor Signature _____

Application Process Fee required with Application \$ _____

Guarantor's Spouse's Signature (if applicable) _____

Property Staff Initials _____