

PARENT RESPONSIBILITY / GUARANTOR FORM

Applicant Name: _____
Property: _____ **Unit:** _____

As Co-Signer, I will be acting as surety for the above name person's rental agreement with University Real Estate & Property Management, LLC. I will be responsible for any charges, damages and for payment for the entire lease agreement, and any successive renewal leases that occur.

I understand that the lease agreement, in which the above name is entered into, is held in **SEVERALTY**. This means that each person on the lease is responsible for the entire amount of rent due on the first of each month and late fees that may occur. If an agreement exists between individuals on the lease as to the amount each person pays, this agreement is personal and doesn't involve our Company. If any one person on the lease does not pay or defaults, all the remaining tenants are still responsible for seeing that the entire amount of rent is paid on the first of the month.

I unconditionally guarantee the prompt and complete payment of all rent due under the foregoing lease. I understand that I may be contacted for payment if the entire amount of rent is not paid as agreed on the lease. Therefore, I am giving my consent to have a credit report made of my credit history.

*In order to process your credit history, we **MUST** have your Social Security Number.
Please be advised that all information will be held confidentially.*

Parent or Guardian: _____ **DATE OF BIRTH:** _____

SS# (Required): _____

Address: _____ **CITY/STATE/ZIP:** _____

Home Phone: (_____) _____ **Work Phone:** (_____) _____

Cell Phone: (_____) _____ **E-Mail Address:** _____

Employer: _____

Position: _____

Employer Address: _____

Parent or Guardian Signature

Date

Walker Investment Co.
312 E. Broad St. Ste C. Cookeville TN 38501
Ph. 931-520-0707 Fax. 931-526-6259

STATE OF _____
COUNTY OF _____

Personally appeared before me, _____, who has shown proper identification and who acknowledged that he/she executed the within instrument for the purposes therein contained.

Witness my hand, at office, this _____ day of _____ 20 _____.

My Commission Expires: _____
PUBLIC

NOTARY