

CO-SIGNER APPLICATION

Applicant					
Name			Date of Birth		Social Security Number
Drivers License Number		Make/Year/Lic Plate		Home Phone ()	Work Phone ()
Present Address			City		State
					Zip
Landlord/Mortgagor		Phone # ()	Length of Residency	Monthly Rent \$	Reasons for Moving
Previous Address			City		State
					Zip
Landlord/Mortgagor		Phone # ()	Length of Residency	Monthly Rent \$	Reasons for Moving
Referred to us by:			Pets Owned: type		Weight of Pet:
					Total Number of Persons to Occupy Apartment:

Employment Information					
Applicant					
Current Employer			Supervisor		Position
					Gross Monthly Income
Address		City	State	Zip	Phone Number ()
					Period of Employment
Previous Employer		Position		Supervisor	
Address		City	State	Zip	Phone Number ()
					Period of Employment

Financial Information		
Checking Account – Bank Name		Address
		Phone Number ()
Savings Account – Bank Name		Address
		Phone Number ()

Emergency Contacts:			
Name:	Address		Relationship
	City, State, ZIP:		Phone Number ()
Name:	Address		Relationship
	City, State, ZIP		Phone Number ()

Have you ever been evicted? Yes No

Do you presently owe money to previous landlord(s)? Yes No

If Yes, explain _____

I/we represent that the above statements are true and complete and authorize verification of information and references given. The undersigned has paid to the Landlord the sum of Thirty-Five (\$35) dollars as a non-refundable fee for Landlord's costs and expenses in verifying the above statements and checking co-signer's credit. This is to inform you that as part of Landlord's procedure for processing your application, an Investigative Consumer Report may be prepared whereby information is obtained through personal interviews with your landlord, employer, or others with whom you are acquainted. This inquiry includes information as to your character, general reputation, personal characteristics, mode of living, and credit history. I/we acknowledge that false information may constitute grounds for rejection of the application, termination of rights of occupancy, forfeiture of deposit and responsibility for damages suffered by Landlord. False statements may also constitute a criminal offense under the laws of this State. Applicant has the right to make a written request within a reasonable period of time to receive additional detailed information about the nature and scope of this investigation (Fair Credit Reporting Act).

EQUAL CREDIT OPPORTUNITY ACT – The Federal ECOA prohibits from discrimination against credit applicants on the basis of sex or marital status. The Federal Agency which administers compliancy with this law concerning this apartment community is Federal Trade Commission. 1718 Peachtree Street NW Room 10000, Atlanta, Georgia, 30308.

_____ Date

_____ Signature of Co-signer

Office Use Only		
Apt. No.	Type:	Rental Amount \$
Move-in Date	Lease Term:	
Security Deposit:	Pet Deposit: \$	Non-Refundable Application Fee: \$
Verified:	Approval:	