



CO-SIGNER AGREEMENT

You are being asked to Co-Sign (guarantee) the lease on the property located at:

.....
If the resident does not pay the rent, you will be responsible for payment. Please be sure that you can afford the rental amount, should that become necessary, and that you are willing to accept this responsibility. Your signature below indicates that you acknowledge that you are acting solely as a **guarantor** to the lease, but **you are NOT a party to the lease**.

The management will seek collection through the resident before approaching you. If these attempts aren't successful, the management will then seek payment through the CoSigner. The same collection methods that we would use for collecting from the resident may be applied to you.

The Lease contract for the above referenced property begins on As witnessed by your signature below, you have received the Co-Signer Agreement and guarantee the rental amount of \$..... per month contracted by should he/she default. You understand that if the terms of the lease are not fulfilled, you will be responsible for any rents owed, late fees, security deposits owed, damages and/or attorney fees.

A copy of the Co-signers drivers license must be attached unless the form has been Notarized.

.....
Print Name

.....
Date

.....
Address

.....
Social Security Number

.....

.....
Phone Number

.....
Signature of Co-Signer