

Copies of two current
pay stubs are required
income verification

*****CO- SIGNER APPLICATION*****

Co-Signer For _____

Please Tell Us About Yourself:

FULL NAME: _____ DATE OF BIRTH: _____ Marital Status: _____

Social Security Number: _____ Phone: () _____

Spouse's Name: _____ SSN: _____ DOB: _____

CURRENT ADDRESS: _____ Zip: _____

How long have you lived there _____

Owner/Agent: _____ Phone: () _____

PREVIOUS ADDRESS: _____

Owner/Agent: _____ Phone: () _____

EMPLOYMENT INFORMATION:

EMPLOYER: _____ Phone # () _____

Address: _____ City/ST/Zip _____

Position: _____ Salary: _____

Spouse Employer: _____ Phone# () _____

Address: _____ City/ST/Zip _____

Position: _____ Salary: _____

CREDIT REFERENCES

Bank/Credit Union: _____ Location: _____

Personal references _____

HAVE YOU EVER:

1. Filed for Bankruptcy: _____ Yes _____ No

2. Been Evicted: _____ Yes _____ No

If you answered YES to an y of these questions, please explain below:

AUTHORIZATION

This application is made for the purpose of procuring rental of the herein described premises, and for credit clearance. Everything that I/We have stated in this application is correct to the best of my/our knowledge. I/We understand that you will retain this application whether or not it is approved. You are authorized to check my/our credit and employment history and to answer questions about my/our credit experience with you. I/We hereby agree to release and hold harmless Ryan Place Management, its agents, servants and employees from any and all liability, legal, proceedings and cost including attorney fee arising out of either the verification of the information contained on the application form or the release of this information to other parties. All of the above data and information set forth herein including, but not limited to the statement of my/our assets, income and financial condition is warrant to be true and accurate and to fully and correctly state my/our financial condition as of the date of this application. I/We also covenant and agree to notify you of any changes in the status of any of the aforementioned items during the period of my/our residency.

DATE SIGNED

CO-SIGNER'S SIGNATURE

DATE SIGNED

NOTARY