

Cosigner Application

Name of Applicant Co	signing:				
_					
Cosigner Information:					
Full Name:		Birth date:			
Social Security Number:		License No. /State:			
Present Address:					
		City		Zip	
How Long?	Home Phone:	ne:Cell:			
Employment:					
Employer:		Address:			
How Long?	Phone:	Position:			
Gross Monthly Pay: \$					
Other Sources of Inco	me:				
Source of Income:	Freq	juency:	Amount	: \$	
Source of Income:	ource of Income: Freq		Amount	: \$	
Source of Income: Fr		luency:	ncy: Amount: \$		
List All Outstanding De	ebts:				
ebtor: Outstandi		ng Amount Due: \$	Amount	Amount: \$	
	r: Outstandin				
Debtor:	r: Outstanding		nount Due: \$ Amount: \$		
Has anvone on this ar	polication ever had any	kind of legal action fil	ed against them b	v a former	
			_		
Landiora. 100/110 ii					
(including, but not limited to credit che understand that if I am denied tenancy or completeness of any information in against because of Race, Color, Origi	ck) I also authorize VIP to fax a copy of due to credit standing. I have the right the consumer report. This application n, Gender, Religion, Familial Status or obtain a tenant screen or credit report	you to make any and all inquires you fe of this application to other agencies in nt to obtain, within sixty days, a free co is subject to approval by owner or his Disability. I warrant that the above inf rt which generally consists of, a) credit	order to obtain a rental or emp opy of my credit report, and the agent. It is understood that I w formation given is true and that	loyment reference. I right to dispute the accuracy ill not be discriminated misrepresentation may lead	
Applicant Signature: _			Date:		

Office Use Only:
Approved____Denied____

Property Address: