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TENANT CO-SIGNER

Property Location:		
Cenant'sName		
Relationship to Tenant :		
Name of Co-Signer:		
Social Security #	Driver License #	
Address:		
City	State	Zip
Phone #	How long	Rent
Previous Address:		
City	State	Zip
Employer:		
Address:		
City	State	Zip
Phone #	Monthly Gross Income	
Job Title	Name of Supervisor	
Other Source of Income:	Amount per Month	
	CO-SIGNER AGREEMENT	
agreement of (tenant's Name)_ ages suffered by Landlord, inclusive said agreement and/or this guaranteed	that this agreement is being executed and for to uding but not limited to, actual attorney rantee, that the undersigned is not of estatutory notices required by law to be	he payment of any monetary dam- ys fees incurred in the enforcing of ccupying the premises and is not
I am aware that a credit report n	may be requested on the above inform	ation.
Signature of Co-Signer		 Date