



CO-SIGNER APPLICATION

- -Must be 18 years of age or older
- -Must have good credit history (700+) that is well established
- -Rent to income ratio must be 25% or less of monthly income (monthly rent ÷ monthly income)
- -Frozen credit report is an automatic denial
- -Photo ID must be submitted with this application

(Initial) I have read the co-signer	r application requ	irements.					
Name (person applying as co-signer for):	4.						
Address (property applying as co-signer for):	4: - 1: 1: 1: 1: 1: 1: 1: 1: 1: 1: 1: 1: 1:						
Co-Signer Applicant Information							
Legal name:	Phone number:						
Email address:							
Social security number:	Date	e of birth:					
Driver's license number:	State issued:						
Residence History							
Current Address:	_ City:	State:	Zip Code:				
Monthly mortgage amount:	Monthly rent amo	ount:	-				
Landlord name:	Phone number:						
Dates occupied:							
Previous Address:	City:	State:	Zip Code:				
Monthly mortgage amount:	Monthly rent amo	unt:	-				
Landlord name:	Phone number:						
Dates occupied:							

Office: 402-466-1686



Emergency Contact				
Name:	Relationship:		Phone number:	
Income Current employer:	_ 4		Date of hire:	
Job title:	Employer a	address:		**************************************
Supervisor name:	F	hone number:		
Gross income per year:	Gross incom	ne per month:		
Other income:		1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 -	_	
Other income:				
Application fee (Non-refundable): Consider that the entered into it may be cancelled by the inaccurate or incomplete. I authorize consumer reporting agency and to consumer reporting agency and to consuch as your resident conduct and profession for the rental unit. NOTE TO CO-SIGNER/GUARANT accept this responsibility. You may be can use the same collection methods payment of rent, and all other charge required of tenant(s). Co-signer's of unless written 30 day notice is reconstructed.	e information is complete Landlord if any of the Landlord if any of the R.D. Hinkley & As ontact references. The ersonal credit history of the Policy of the Policy of the Edward of the Agreement of the Agreemen	plete and accurate f the information sociates to verify the function of this y. If applicant is a asked to guarant rent, fees, or any be used against the ent and shall, with	e. I understand that is provided in the app the above information agency is to track as approved, applicant is see this lease. Please damages. R.D. Hink the tenant(s). Co-sign the tenant, performed date of the tenant	in the event a lease is lication if materially on through a nd maintain record is legally obligated be sure you want to ley & Associates Inc. her guarantees in the obligations t's residency
Co-signer applicant signature		Date		

Sept 2024

Office: 402-466-1686 www