

Co-Signer Application

(Resident(s) with no rental history must have a parent co-sign for approval)
This form is for the parent of the Resident(s), but the Resident(s) must still fill out a full application!

HJG,LLC

BACKGROUND INFORMATION AND HISTORY

NAME: _____ Social Security # _____ Drivers License # _____

Date of Birth: _____

Home Phone _____ Work Phone _____ Other Phone _____

Current Address _____ / _____ / _____ / _____
City State Zip-Code

Do you own the above addressed location? _____ If not list manager and phone # for referral: _____

Length of residency: _____ (current address) Length of residency: _____ (previous address)

Previous Address _____ / _____ / _____ / _____
City State Zip-Code

Do you own the above addressed location? _____ If not list manager and phone # for referral: _____

EMPLOYMENT

Employer _____ Current Occupation _____ Phone _____

Supervisor: _____ Yrs. _____ Monthly Income _____ Other Income _____

CREDIT HISTORY

Do you have an account with a local bank? Yes ___ No ___ Which Bank/Branch? _____

Have you ever filed Bankruptcy? Yes ___ No ___ Have you ever been sued? Yes ___ No ___ Have you ever been Evicted? Yes ___ No ___

Explain if yes to any of the above _____

MISCELLANEOUS:

Personal Reference _____ Address _____ Phone _____

Personal Reference _____ Address _____ Phone _____

I certify that all the information given above is true and correct, I authorize the Owner/Manager of the property listed above to verify any and all of the information and references provided and to obtain all relevant credit background information pertaining to me. I instruct you to contact and employment or credit check concerning the application. I/We are paying a non-refundable holding deposit of \$ 300 this is to hold the apartment known as RoseLawn Apartments 200 Walrose Circle Searcy, AR.

I/We acknowledge that the Manager is holding an apartment. I/We forfeit all rights to the holding deposit listed above and could be liable for rent until apartment is re-rented. I/We understand that Nanette McCollough is an Agent of the Landlord and is a Representative of the Landlord. I/We acknowledge that this written notice was received before I/We received a lease agreement.

Co-Applicants Signature Date

Manager's Signature Date

www.arkansasapartments.net

**ALL CO-SIGNERS MUST TURN IN A COPY OF THEIR STATE ISSUED
IDS OR DRIVER'S LICENSE. THANK YOU!**

HJG, LLC

Co-signer Form
An addendum to Lease Agreement

Dated: _____

This agreement is attached to, and forms part of the Lease Agreement dated: _____ between (HJG, LLC), the Owners of the ROSE LAWN APARTMENTS

And _____ resident(s)

For the apartment located at: 200 WALROSE CIRCLE SEARCY AR. 72143.

My name is _____ and I have completed a Rental Application for the express purpose of enabling the Owner/ Agent to check my credit. I have no intention of occupying the unit referred to in the Lease Agreement above.

I have read the Lease Agreement and the Apartment House Rules and I promise to guarantee the Resident(s) compliance with the financial obligations of this agreement.

I understand that I may be required to pay rent, cleaning charges, or damage assessments in such amounts as are incurred by the Resident(s) under the terms of this agreement if and only if the Residents(s) themselves fail to pay.

I also understand that this Cosigner Agreement will remain in force throughout the entire term of the Resident(s) tenancy, even if their tenancy is extended and/ or is changed in its terms.

Cosigner

Date

Acceptance by Owner/ Manager

Date