

**GUARANTY OF LEASE  
CO-SIGNER**

(979) 696-4464 Office (979) 696-0234 Fax

*Our Privacy Policy Is Available To You Upon Request*

CREDIT REPORTS WILL BE RUN ON CO-SIGNER. THE CO-SIGNER IS EQUALLY RESPONSIBLE FOR THE TERM OF THE CONTRACT. IN CASES OF MULTIPLE TENANCIES, THE CO-SIGNER IS RESPONSIBLE FOR THE TOTAL RENT.

DATE: \_\_\_\_\_

**PLEASE TELL US ABOUT YOURSELF**

Co-Signer (Full Name): \_\_\_\_\_ Relationship \_\_\_\_\_

Present Address: \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Driver's License #: \_\_\_\_\_ State \_\_\_\_\_ Date of Birth: \_\_\_\_\_ SSN#: \_\_\_\_\_

Home Phone: (\_\_\_\_) \_\_\_\_\_ Cell Phone: \_\_\_\_\_

Email: \_\_\_\_\_

Spouse's Name: \_\_\_\_\_ Relationship \_\_\_\_\_

Driver's License#: \_\_\_\_\_ State \_\_\_\_\_ Date of Birth: \_\_\_\_\_ SSN #: \_\_\_\_\_

**(APPLICANT) PLEASE GIVE YOUR EMPLOYMENT INFORMATION**

Co-Signer Employer's Name \_\_\_\_\_

Address: \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Work Phone: (\_\_\_\_) \_\_\_\_\_

How Long: \_\_\_\_\_ Position: \_\_\_\_\_ Monthly Gross Income: \$ \_\_\_\_\_

**(SPOUSE) PLEASE GIVE YOUR EMPLOYMENT INFORMATION**

Spouse Employer's Name \_\_\_\_\_

Address: \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Work Phone: (\_\_\_\_) \_\_\_\_\_

How Long: \_\_\_\_\_ Position: \_\_\_\_\_ Monthly Gross Income: \$ \_\_\_\_\_

I, as the co- signer for (tenants name) \_\_\_\_\_ hereby guarantee to said landlord the performance of all duties and obligations of the tenant, prompt and unconditional payment of each and every obligation, and accept full responsibility for the attached lease agreement, including but not limited to damages, expenses, court costs and attorneys fees incurred under the terms of the lease for the property known as:

**Address of unit** \_\_\_\_\_

Guarantor also consents that the obligations of the tenant hereby guaranteed may be renewed, modified, extended or released by the landlord. Said Guarantee shall be absolute, unconditional and shall continue until all obligations and payments are fully satisfied.

Guarantor further warrants and represents that the information given is true and correct, and that by signing this document agrees and accepts full liability for the tenants lease agreement and all of its provisions.

By signing this lease Guaranty, the undersigned hereby guarantees all obligations of resident under the above Lease Contract. This Lease Guaranty shall continue and will not be affected by amendments, modifications, roommate changes or deletions, unit changes, or renewals of the lease Contract which may be agreed to from time to time between resident and management. Delay or failure by management to exercise rights, pursue remedies under the lease against the resident apply to Guarantor as well. All residents and Guarantors are jointly and severally liable. This Guaranty is part of the Lease Contract and shall be performed in Brazos County where the dwelling unit is located.

\_\_\_\_\_  
Printed Name

\_\_\_\_\_  
Printed Name

\_\_\_\_\_  
Signature (guarantor) Co-Signer

\_\_\_\_\_  
Signature (guarantor) Spouse