



QUADRANGLE APARTMENTS

Co-Signer Application

Regarding Resident(s): _____

Applicant Information

Last Name: _____ First: _____ Middle: _____

Maiden or Former Names: _____

Social Security Number: _____ Date of Birth: _____

Home Phone: _____ Cell Phone: _____

Work Phone: _____ Additional Phone: _____

Bank Name: _____ Driver's License #: _____ State of Issue: _____

Residential Information

Present Rent Own Family Dates There: _____ Rent/Mo. Payment: \$ _____

Street Address: _____ City: _____ State: _____ Zip: _____

Apartment/Landlord Name: _____ Phone: _____

Prior Rent Own Family Dates There: _____ Rent/Mo. Payment: \$ _____

Street Address: _____ City: _____ State: _____ Zip: _____

Apartment/Landlord Name: _____ Phone: _____

Employment and Income Information

Employer: _____ Position: _____ Monthly Income: \$ _____

Street Address: _____ City: _____ State: _____ Zip: _____

Start Date: _____ Supervisor Name: _____ Phone: _____

Other Source of Income Source: _____ Monthly Income: \$ _____

Additional Information

Have you ever been sued? Yes No Are You Currently in a legal suit? Yes No

Are there any outstanding judgments against you? Yes No

Have you declared bankruptcy within 7 years? Yes No If yes, indicate when, where (include city and street address)

by whom, for what reason, and outcome of the action. _____

As Co-Signer(s), I will be acting as surely for the above named person's rental agreement with The Quadrangle Apartments. I will be responsible for any charges, damages and for payment for the entire lease agreement, and any successive renewal leases that occur, including transfer leases.

I understand that the lease agreement, in which the above named is entered into, is held in SEVERALTY. This means that each person on the lease is responsible for the entire lease as the entire amount of rent due on the first of each month and late fees that may occur. If an agreement exists between individuals on the lease as to the amount each person pays, this agreement is personal and not one the Management has made with individual tenants. If any one person on the lease does not pay or defaults, all of the remaining tenants are still responsible for seeing that the entire amount of rent is paid on or before the first of each month. I unconditionally guarantee the prompt and complete payment of all rent due under the foregoing lease. I understand that I may be contacted for payment if the entire amount of rent is not paid as agreed on the lease. Therefore, I am giving my consent to have a credit report made of my credit history.

Signature _____ Date _____

To be completed by office staff:

Address: 1207 S. Wall St. Carbondale, IL 62901

Date: _____

Leasing Rep: _____

Move in date: _____

Unit Type: _____

Term: _____

Rent for entire lease: \$ _____

Number of persons to occupy apartment: _____