



GUARANTOR FORM

I, _____, parent(s)/guardian(s) of _____
(Name of Co-Signer) (Name of Tenant)
will be responsible for any financial obligations, such as rent, related services or
damages incurred by _____, at _____
(Name of Tenant) (Apartment Address)
throughout the initial term of the lease and any extensions thereafter.

PARENT/GUARDIAN INFORMATION

Name of Co-Signer Social Security No.

Email Address Home Phone

Present Address City, State & Zip

Current Employer Job Title Salary

Business Phone Type of Business Length of Employment

I hereby authorize Encore Realty to perform a credit check in order to determine my ability to serve as guarantor in the above situation.

Co-Signer Signature Date

Notary Public State of _____ County of _____

I, _____, a notary public, in and for the county

_____ aforementioned, do hereby certify that _____ personally appeared before me and is personally well known to me as the person who executed the said deed, and acknowledge the same to be his/her free act and will.

Notary Public Signature Date