



1202 Regent St. - Madison WI 53715
Phone (608)251-8777 - Fax (608)255-9656

CO-SIGNER APPLICATION

Please fill out the application completely. By signing this document, you indicate that you have read and understand this Application and that all information that has been submitted is true and accurate.

By signing this document, you also indicate that you authorize management to conduct routine housing references, employment verifications, criminal background checks, public record checks, financial reference investigations and to obtain and rely on credit agency reports for the purpose of processing this application.

CO-SIGNER INFORMATION

First Name Middle Last

Date of Birth Social Security # DL#

Phone # E-mail

For whom, or which address are you co-signing for?

Relationship to applicant:

Current Address City/State Zip

How long have you been at the current address?

Do you rent or own your current residence? \*If you rent, please provide Landlord contact information below\*

Current Landlord Landlord Phone ( ) Fax

Landlord's Address City/State Zip

Rent paid / Month \$ From / / to / / Utilities you pay

EMPLOYMENT INFORMATION

Current Employer Phone ( )

Address City/State Zip

Position Income \$ / Month

How long have you been employed with the company?

Other income sources and amounts:

A facsimile signature by you on this Agreement and Application is just as binding as an original signature. It is not necessary for you, as Co-Signer, to sign the Lease Agreement itself, nor be named on the Lease Agreement. Once the prospective applicant application is approved, a separate co-signer agreement will be submitted for signature.

Cosigner's Signature Date