

CO-SIGNER APPLICATION

INCOMPLETE FORMS WILL NOT BE CONSIDERED

APLICACIONES INCOMPLETAS NO SERAN ACEPTADAS

Nosotros no hablamos español. Necesitamos la comunicacion con todas las personas en la aplicacion. TPM no sera responsable si no entiende los detalles de su contrato, por favor, haga que alguien se lo traduzca.

Cosigner requirements: 1. Good credit, which means no accounts in collections, delinquent accounts, or bankruptcy, 2. You have to work for a company (Cannot be self employed or retired) 3. Must earn enough to pay for your own bills as well as the rent or any outstanding balances the applicant (the person you are cosigning for) does not pay 4. Cannot be an out of state cosigner.

Date _____

Person you are co-signing for _____

Your Name _____ Phone _____ Cell _____

Social Security # _____ Birthdate _____ Driver's License _____

Present Address _____ City _____ State _____ Zip _____

Your employer _____ Position _____ Salary _____

How long have you been employed there? _____ Employer's phone _____ Cell _____

DISCLOSURE: **ANY intentionally or knowingly false information will be sufficient cause for IMMEDIATE rejection of application**

I/We declare the foregoing information is true and correct, and I/we hereby authorize TPM to conduct an employment and credit check, to verify our references, rental landlords, and any other pertinent information.

I understand that as co-signer for _____, I will be required to co-sign the contract. I understand that I will be responsible for any rent, utilities, cleaning, or other contractual requirements not fulfilled by the person for whom I am co-signing.

Co-Applicant's Signature Date

FOR OFFICE USE ONLY – DO NOT WRITE BELOW

Co-Applicant's Employment _____ Verified Correct? _____