

**RENTAL APPLICATION
CO-SIGNER**

Address of this rental _____

Applicant(s) _____

Co-signer _____
 First Middle Last

Birthdate _____ Phone # _____

Soc.Sec.# _____ Driver's lic. # _____

Address _____

Buying home _____ Renting _____

If renting, manager _____ Ph. # _____

Co-signer current employer _____

Position _____

Supervisor _____ Ph. _____

Dates employed _____ to _____ Hrs./wk. _____ Salary _____

If current employment is less than two years:

Previous employer _____

Position _____

Supervisor _____ Ph. _____

Dates employed _____ to _____ Hrs./wk. _____ Salary _____

I understand that by co-signing the Rental Application for the above named applicant(s), I agree to pay for rent, late fees, cleaning and damages, if any, caused by but not reimbursed by said applicant/tenant(s). This is binding upon me until I receive notice in writing from the owner that I am no longer co-signer.

Co-signer signature

Date

Owner: John Lowry, P. O. Box 1648, Milton, WA. 98354-1648, tel. (253) 841-4948,
Fax (253) 445-1582. If faxed, call to inform of transmission.