

PARENT GUARANTEE

FOR THE APARTMENT LOCATED AT _____

WE/I agree to be responsible to LANDLORD for the liability of:
(Please print Tenant name)

under the terms of the LEASE for the above named property. Our responsibility will continue for the entire term of the LEASE and for each and every renewal thereof. In the case of any default of the LEASE as to payment of rent or otherwise, the LANDLORD may seek recourse from us by suit or otherwise, provided that WE/I have been given written notice of said default and further have been given ten (10) days within which to cure said default.

We/I agree, upon notice, as described above, to pay to the LANDLORD an amount sufficient to cure any default. Default under the lease may include past due rent, property damage, loss of use of the property or unpaid utility charges, etc. It is agreed that the amount due to cure the default shall not exceed the total of all of the defaults under the LEASE. *Where there is more than one TENANT signing the lease, all parties and guarantors are jointly and severally liable.*

It is the tenant's responsibility to provide the Guarantor with a copy of the executed lease along with any renewals thereof.

By signing below, I acknowledge that it is my responsibility to obtain a copy of the lease and any subsequent renewals of the lease from the tenant.

NOTICE: This guarantee will remain valid for as many years as tenant occupies property.

Signed this _____ day of _____, 20____.

PARENT SIGNATURE

YOU ARE REQUIRED TO COMPLETE THE REVERSE SIDE OF THIS FORM

PARENT NAME _____

ADDRESS _____

CITY _____ STATE _____ ZIP _____

TELEPHONE NUMBER _____ *PLEASE ATTACH A COPY OF YOUR

RELATIONSHIP TO TENANT _____

PHOTO ID

GUARANTOR RENTAL APPLICATION

INVESTIGATION FEE \$40.00

TODAY'S DATE _____

**JOHN C. R. KELLY REALTY, INC. 3535 BLVD OF THE ALLIES
PITTSBURGH, PA 15213 (412) 683-7300 /FAX (412) 683-0278**

HOME # _____ CELL # _____ WORK # _____

ADDRESS OF RENTAL UNIT YOU ARE GUARANTOR FOR (PLEASE GIVE APT. NO.)

_____ RENTAL RATE \$ _____ LEASE BEGIN DATE _____

STUDENT'S NAME _____

GUARANTOR NAME _____ S.S.# _____ BIRTHDATE _____

PRESENT ADDRESS _____

CITY _____ STATE _____ ZIP _____

RENT OR OWN _____ NO. OF YEARS OCCUPYING _____ MONTHLY RENT _____

PRESENT EMPLOYER _____

ADDRESS _____ ZIP _____ HOW LONG _____

NET MONTHLY PAY _____ OCCUPATION _____

OTHER SOURCE OF INCOME (IF ANY) _____

CHECKING ACCOUNT (BANK AND BALANCE) _____

SAVINGS ACCOUNT (BANK AND BALANCE) _____

HAVE YOU BEEN DENIED CREDIT OR BEEN DELINQUENT WITH CREDITORS _____ IF YES WHY?

NEAREST RELATIVE OR PARENT (GIVE FULL ADDRESS AND PHONE NUMBER)

NAME _____ RELATIONSHIP _____

ADDRESS _____ (CITY) _____ (STATE) _____

PHONE # () _____

PLEASE ANSWER THE FOLLOWING:

(I/WE) HAVE DEPOSITED \$ _____ AS SECURITY WITH THIS APPLICATION. IT IS UNDERSTOOD IN THE EVENT (I/WE) SHOULD DECIDE NOT TO RENT THE APARTMENT AFTER PLACING THE DEPOSIT ON IT, SAME SHALL BE FORFEITED. **NO EXCEPTIONS.**

BY SIGNING BELOW, I ACKNOWLEDGE I HAVE READ AND FULLY UNDERSTAND THE ABOVE AND AGREE TO THE TERMS LISTED BY JOHN C. R. KELLY REALTY, INC.

PROSPECTIVE GUARANTOR (DATE)

PROSPECTIVE CO-GUARANTOR (DATE)

BY SIGNING BELOW, I ACKNOWLEDGE RECEIPT OF THE U.S. EPA PAMPHLET "PROTECT YOUR FAMILY FROM LEAD IN YOUR HOME". (Pamphlet will be given to tenant/occupant)

PROSPECTIVE GUARANTOR (DATE)

PROSPECTIVE CO-GUARANTOR (DATE)

IF APPLICATION IS DENIED THE SECURITY DEPOSIT WILL BE RETURNED LESS ANY INVESTIGATION FEE AND/OR DEDUCTIONS, IF APPLICABLE. CREDIT PROFILES MUST BE COMPLETED IN ORDER TO PROCESS THIS APPLICATION. **NO EXCEPTIONS.**