



CO-SIGNER CREDIT APPLICATION

Castle Property LLC

206 South Avenue, Harrisonburg, VA 22801 Office (540) 564 - 2659 FAX (540) 564 - 2659
e-mail: office@castleproperty.com web site: http://www.castleproperty.com



Application for which property? _____

Please feel free to contact our office if you have any questions about this property. Since we offer Individual leases, we require a financially qualified Co-Signer for each Tenant. Photos and descriptions of the properties are available along with the lease terms on our web site.

CO-SIGNER NAME:

Last Name: _____ First Name: _____ Middle Name: _____

Date of Birth: ____ / ____ / ____ E-Mail Address: _____ SSN: _____ - _____ - _____

Note: Your birth date and SSN are required to run a credit report. Information is confidential and not released for any other purpose.
Is the Co-signer a United States Citizen or permanent resident? Yes No
Prepayment of rent within twenty (20) days of lease signing is required for non US citizens or non-permanent residents.

RESIDENTIAL INFO

Current Street Address: _____ Telephone: (____) _____ - _____

City: _____ State: _____ Zip: _____ Occupied Since: ____ / ____ Own Rent

EMPLOYMENT INFO

Current Employer: _____ Position: _____

Current Street Address: _____

City: _____ State: _____ Zip: _____ Employed Since: ____ / ____

Supervisor: _____ Telephone: (____) _____ - _____

TENANT NAME

Last Name: _____ First Name: _____ Middle Name: _____

Co-Signer's relationship to Tenant: Mother Father Grand Parent Other: _____

If relationship is "Other", please contact office for pre-approval.

CONTACT INFO

Would you like to be notified in the event of an emergency relating to the tenant listed above? Yes No

What is your preferred contact number for DAYTIME: (____) _____ - _____ EVENING: (____) _____ - _____

FINANCIAL QUALIFICATION WILL BE BASED ON THE FOLLOWING INFORMATION

In the past 10 years have you had any of the following:

Past due balance over \$100.00 Yes No Don't know

Payment later than 60 days Yes No Don't know

Any civil judgments or tax liens Yes No Don't know

Any debts placed for collection Yes No Don't know

Please comment on YES answers: _____

By signing below, I affirm that all the information is correct or to the best of my knowledge. I hereby give permission to verify the above information directly or through a credit bureau. If this application is found to contain materially false information, the application fee paid by the Tenant is automatically forfeited.

Signature of Co-Signer: _____ Date: _____

--- OR ---

Signature of Tenant authorized to sign by the Co-Signer: _____ Date: _____