



CO-SIGNER APPLICATION

TO BE COMPLETED BY EACH CO-SIGNER

ALL UNITS
SUBJECT TO
AVAILABILITY



OFFICE USE ONLY

PROPERTY NAME / NUMBER _____
 UNIT NUMBER _____ ADDRESS _____
 UNIT RENT \$ _____ NON-REFUNDABLE SCREENING CHARGE \$ \$25.00
 OWNER / AGENT Principle Property Management PHONE 541-345-6789
 OWNER / AGENT ADDRESS 2677 Willakenzie Rd. Ste 2, Eugene, OR 97401
 PERSONS APPLYING TO BE RESIDENTS _____

CO-SIGNER

CO-SIGNER FULL LEGAL NAME _____ **EMAIL** _____
 PREVIOUS NAMES, ALIASES OR NICKNAMES USED _____
 DATE OF BIRTH _____ SOC. SECURITY # _____ CO-SIGNER PHONE (_____) _____
MM/DD/YYYY
 GOVERNMENT ISSUED PHOTO I.D. TYPE _____ # _____ / STATE _____ EXP. DATE _____
MM/DD/YYYY
 CURRENT STREET ADDRESS _____
 CITY _____ STATE _____ ZIP _____ DATE YOU MOVED IN _____
MM/DD/YYYY
CURRENT LANDLORD NAME _____ **LANDLORD PHONE** (_____) _____
 STREET ADDRESS (OR APARTMENT NAME) _____
 CITY _____ STATE _____ ZIP _____
CURRENT EMPLOYER _____ **PHONE** (_____) _____
 STREET ADDRESS _____
 CITY _____ STATE _____ ZIP _____
 POSITION _____ HOW LONG? _____
 GROSS MONTHLY INCOME \$ _____
OTHER MONTHLY INCOME: SOURCE _____ \$ _____ / SOURCE _____ \$ _____
ARE YOU SELF-EMPLOYED? YES NO

OTHER

EMERGENCY CONTACT _____ **PHONE** (_____) _____
 ADDRESS _____
 HAVE YOU EVER BEEN EVICTED, OR ARE YOU CURRENTLY IN THE EVICTION PROCESS? YES NO IF YES, DATE _____
MM/DD/YYYY
 HAVE YOU EVER FILED FOR BANKRUPTCY, OR ARE YOU CURRENTLY IN THE BANKRUPTCY PROCESS? YES NO IF YES, DATE _____
MM/DD/YYYY
 HAVE YOU EVER HAD A HOME FORECLOSED ON, OR ARE YOU CURRENTLY IN THE FORECLOSURE PROCESS? YES NO IF YES, DATE _____
MM/DD/YYYY
HAVE YOU EVER BEEN CONVICTED OF, OR PLED GUILTY OR NO CONTEST TO, ANY FELONY
OR MISDEMEANOR? YES NO IF YES, WHO _____ WHERE _____ WHEN _____
MM/DD/YYYY
 WHAT _____

SCREENING

Owner/Agent has charged a screening charge as set forth above. Owner/Agent may obtain a consumer credit report and/or an Investigative Consumer Report which may include the checking of the co-signer's credit, income, employment, rental history, and criminal court records and may include information as to his/her character, general reputation, personal characteristics, and mode of living. You have the right to request additional disclosures provided under Section 606(b) of the Fair Credit Reporting Act, and a written summary of your rights pursuant to Section 609(c). You have the right to dispute the accuracy of the information provided to the Owner/Agent by the screening company or the credit reporting agency as well as complete and accurate disclosure of the nature and scope of the investigation.

SCREENING COMPANY OR CREDIT REPORTING AGENCY
 COMPANY NAME Contemporary Information Corp. PHONE 800-288-4757 opt 4
 ADDRESS 42913 Capital Drive, Unit 101, Lancaster, CA 93535
 EMAIL _____

SIGNATURE

I certify that the above information is correct and complete and hereby authorize you to do a credit check and make any inquiries you feel necessary to evaluate my credit standing and ability to serve as co-signer. I understand that giving incomplete or false information is grounds for rejection of this application. I understand that if any information supplied on this application is later found to be false, this is grounds for termination of the tenancy of the residents. I have received and read the Owner/Agent's co-signer criteria. I am applying solely to act as a co-signer and will not be occupying the unit.

CO-SIGNER X _____ DATE _____ PHOTO I.D. VERIFIED BY _____
MM/DD/YYYY (INITIALS)
 OWNER/AGENT X _____ DATE RECEIVED _____ TIME RECEIVED _____
MM/DD/YYYY
 OWNER/AGENT NOTES _____

CRITERIA FOR CO-SIGNERS

(Applicable only if Owner/Agent does not have custom criteria.)

GENERAL STATEMENTS

1. Current, positive, government-issued photo identification that allows Owner/Agent to adequately screen for criminal and or credit history will be required.
2. Each applicant will be required to qualify individually or as per specific criteria areas.
3. Inaccurate, incomplete or falsified information will be grounds for denial of the application.

INCOME CRITERIA

1. Monthly income must be equal to _____ times (if blank, 4 times) stated rent, and must be from a verifiable, legal source.
2. Twelve months of verifiable employment will be required if used as a source of income.
3. Applicants using self-employment income will have their records verified through the state corporation commission, and will be required to submit records to verify their income, which records may include the previous year's tax returns.

RENTAL HISTORY CRITERIA

1. Twelve months of verifiable contractual rental history from a current unrelated, third party landlord, or home ownership, is required.
2. Three or more notices for nonpayment of rent within one year will result in denial of the application.
3. Three or more dishonored checks within one year will result in denial of the application.
4. Rental history reflecting any past due and unpaid balances to a landlord will result in denial of the application.

EVICTION HISTORY CRITERIA

Five years of eviction-free history is required. Eviction actions that were dismissed or resulted in a judgment for the applicant will not be considered.

CREDIT CRITERIA

1. Ten or more unpaid collections (not related to medical expenses) will result in denial of the application.

CRIMINAL CONVICTION CRITERIA

Upon receipt of this application and the screening fee, Owner/Agent will conduct a search of public records to determine whether applicant has a "Conviction" (which means: charges pending as of the date of the application; a conviction; a guilty plea; or no contest plea), for any crime involving financial fraud, including identity theft and forgery. Any Conviction within the last seven years will result in a denial of the application.