## **CO-SIGNER APPLICATION** LANDLORDS OF IOWA, INC.

Name of Person for whom I agree to co-sign:		Address of unit Applied for	
Relationship to that person			
Co-Signer's Name		Date of Birth	
SOCIAL SEC.#	DRIVER'S LIC.#	PHONE#	
Present Address		Own	_ Rent
If RENTAL, Name\number of Landlord		PHONE	
If less than 3 years at above ac List Previous address	ddress,	Own	Rent
If RENTAL, Name\number of Landlord		PHONE	
Present Occupation			
Employer		PHONE	
How long		nt Supervisor	
Subject to transferNo	_Yes		
MONTHLY GROSS TOTAL INCOME \$	How long has	this been your income?	
If less than three years at presentist previous job information for [Use the backside if necessary]	or total of last 3 vea	rs	
1. Credit Reference		Balance Owed	
2. Credit Reference		Balance Owed	
3. Bank\Credit Union Reference	e		
Address			
Checking\Share Draft Accou	nt Yes No	Savings Account Yes N	o
I authorize all information to be chincorrect, the Co-signer will be re	necked for verification jected.	. If any of the above answers are f	ound to be
I also authorize verification of emporedit Bureau Report.	ployment, bank accou	nts, credit history, and rental histo	ory including a
I declare that my rental\home own	ership history and cre		
Co-Signer's Signature		Date	Rev. 08/31/05