AMERICA FIRST PROPERTIES

CO-SIGNER APPLICATION

Co-signer's Last Name/First Name/MI _____ Social Security # _____ Driver's License # _____ Date of Birth _____

Employer _____ Address _____ County _____

(_____)_____-_____ Area Code/Phone Number

Supervisor Name _____ Job Title _____

$_____ Salary

Employment Dates – From/To: _____

Co-signer's Spouse's Name _____ Social Security # _____ Driver's License # _____ Date of Birth _____

Spouse's Employer _____ Address _____ County _____

$_____ Salary

Employment Dates – From/To: _____

Present Residence of Co-signer _____ Monthly Rent/House Payment; Yrs at Location _____

(_____)_____-_____ Co-signer Area Code/Phone Number

Name of Landlord/Mortgage Holder _____

Co-signer agrees that the above statements are true and complete and authorizes verification of information given. It is understood the amount received, $15.00, is a nonrefundable application fee for the co-signer. A co-signer must complete an application and meet qualifying criteria including employment and credit history. A co-signer will be fully responsible for the lease if the occupying resident defaults. [redacted]

Co-signer Signature _____ Date _____

Co-signer Signature _____ Date _____

Application Received By _____ Date _____

Application Approved By _____ Date _____

EQUAL HOUSING OPPORTUNITY

Revised 5/20/2008