

LEASE CONTRACT GUARANTY FORM

Resident shall be _____

Each Guarantor must submit a separate Lease Contract Guaranty. It must be notarized unless signed in the presence of a Greystar staff member. As Guarantor(s) signing this Lease Contract Guaranty, I guaranty all obligations of Resident(s) under the Lease described below.

You agree that your obligation will continue through the lease term and any renewals and/or transfers and will not be affected by amendments, changes, assignments or subleases of the Lease. If we, as landlord, delay or fail to exercise lease rights, pursue remedies, give notices, or make demands to the resident(s) or to you, as Guarantor, these will not act as a waiver of our rights as owner or as landlord. All of our remedies against the Resident(s) apply to Guarantor(s), as well. The Resident and Guarantor are jointly and severally liable. It is not necessary for us to sue or exhaust remedies against the Resident in order for you to be liable.

You represent that all information submitted by you on this Guaranty is true and complete. You authorize us to request and obtain consumer reports, verification of income and employment, rental history reports, and other credit reports on you. A facsimile by you on this Guaranty will be just as binding as an original signature. It is not necessary for you, as guarantor, to sign the Lease itself or to be named in the Lease. The Guaranty does not have to be referred to in the Lease. If we seek to enforce this Guaranty, you agree that it can be in the county where the Apartment Community is located, no matter where you reside.

Owner Representative:

Printed Name _____
Signature _____
Date _____

Guarantor Information:

Printed Name _____
Address _____
City, State, Zip _____
Phone # _____
E-mail _____
Social Security # _____
Driver's License # _____
Driver's License State _____
Date of Birth _____
Monthly Income _____
Phone _____
Fax _____
Date _____
Guarantor's Signature _____

Place
Notary Seal
Here

NOTARY OF GUARANTOR'S SIGNATURE

If Guarantor does not sign this agreement in the presence of an authorized community associate or online, Guarantor must either fax a valid state ID or have agreement notarized. Fax signatures are legally binding.

This instrument was acknowledged, sworn to and subscribed before me on this _____ day of _____, 20 _____

Notary Public Signature _____

FOR ON-SITE STAFF USE ONLY: Staff is required to complete the following information after guarantor status is received: <input type="checkbox"/> Guarantor Accepted <input type="checkbox"/> Guarantor Denied Date Received _____ Staff Initials _____ Resident Notified _____ (Date and Staff Initial)		
---	--	--