

# LTS Co-Signer Application

Date: **Fill out this application thoroughly and return to landlord.**

Landlord:	Email:	Rent: \$
LL ID #:	Fax:	Deposit: \$
Phone:	Address of Property:	

Who are you co-signing for? Relationship:

**We accept Visa, Master Card, and Debit Cards ONLY. \$40 Per Person Processing Fee-\$50/Married. This application will not be processed until payment is received. Application fee is non-refundable.**

Do you give LTS permission to process your card for payment? Yes  No  Signature:

Name of Card Holder: Exp Date:

Card Number: Visa/MC: Zip Code:

Security Code (Three digits on back of card): (Where you receive your billing statement)

## CO-SIGNER INFORMATION:

Name: Last First Middle Maiden Name:

SSN: DOB: Drivers Lic #:

Marital Status (One:) Single  Married  Separated  Divorced  Widowed  How Long?

Cell Number: Home Number:

Email: Preferred Contact Method: Cell  Home  Email

## SPOUSE INFORMATION:

Name: Last First Middle Maiden Name:

SSN: DOB: Drivers Lic #:

Marital Status (One:) Single  Married  Separated  Divorced  Widowed  How Long?

Cell Number: Home Number:

Email: Preferred Contact Method: Cell  Home  Email

## CURRENT ADDRESS:

Street: Apt #:

City: State: Zip:

Name of Complex: Landlord Name: Phone:

Rental Amt. \$ Move In Date: Lease Term Date:

Mortgage Lender: Payment Amt. \$

## PREVIOUS ADDRESS:

Street: Apt #:

City: State: Zip:

Name of Complex: Landlord Name: Phone:

Rental Amt. \$ Move In Date: Lease Term Date:

Mortgage Lender: Payment Amt. \$

Reason for moving:

## EMPLOYMENT INFORMATION: (Last two paycheck stubs required.)

Employer: Address:

Position: Hire Date: Term Date:

Hourly Rate: Annual: \$ FT  PT

Supervisor: Phone: Paid How Often:

**SPOUSE EMP. INFORMATION: (Last two paycheck stubs required.)**

Employer:	Address:	
Position:	Hire Date:	Term Date:
Hourly Rate:	Annual: \$	FT <input type="checkbox"/> PT <input type="checkbox"/>
Supervisor:	Phone:	Paid How Often:

**ADDITIONAL INCOME: Example: SSI, SS, Child Support, Alimony, Food Stamps, etc.**

Source:	Amt: \$	How Often:
Source:	Amt: \$	How Often:

**REFERENCES: (Required)**

Name:	Address:	Relationship:	Phone:
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1.)

2.)

*LTS has provided a "checklist" to help you with the information we need.  
Inaccurate information or documentation not provided will slow down this process.*

**Provide a copy of your Drivers License or State ID and Social Security card along with the application.**

CheckList: <input checked="" type="checkbox"/>	Accepted Verification:
Employed <input type="checkbox"/>	Paycheck Stubs (Two most recent for each job.)
Self-Employed <input type="checkbox"/>	Tax Statement & Bank Statements (Two months.)
Military <input type="checkbox"/>	Leave & Earning Statement (LES)
SSDI or SSI <input type="checkbox"/>	Award Letter or Bank Statement~If you have direct deposit.
Pension <input type="checkbox"/>	Award Letter or Bank Statement~If you have direct deposit.

**Comments:**

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**Applicant hereby certifies that the information provided on this application is accurate and truthful. Applicant/ understands Landlord Tenant Services and its subsidiaries will obtain a credit report, personal profile, and criminal background history. I understand as a co-signer, I am legally responsible for any past-due rent, late fees, and damages that may acquire if the person I'm co-signing for does not fulfill the lease agreement. Furthermore, I am aware this could affect my credit rating if all obligations are not met within the time stated in the lease.**

**By signing this application, I authorize my Employer, Past Employer, Landlord, Previous Landlord, Mortgage Lender, Bank, Financial Institution, Credit Union and/or Personal References to release any information requested.**

**SIGNATURES:**

Print Name:	Signature:
Spouse Print Name:	Spouse Signature:

**Landlord or Authorized Agent Signature:**

Print Name:	Signature:
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