CO-SIGNER APPLICATION LANDLORDS OF IOWA, INC.

| Name of Person for whom You are co-signing | Relationship to that person: | |
|---|--|---|
| | | |
| Address of unit Applied for. | | |
| Co-Signer's Full Name: | Date of Birth: | |
| Social Security # | Phone # | |
| Present Address: | Ow | nRent |
| (If Renting, Give Name/Phone Number Landlord) | | |
| Occupation: | | - |
| Monthly Income: | | |
| Application For Tenancy so that the La Report, Verification of Employment, at the unit referred to on the Application a Agreement, the Rules, and the Security Tenant's financial obligations of these for rent, cleaning charges, unpaid utility charges, eviction, and any legal or cour terms of these Agreements if the Tenant Lessor will give me written notice of dewithin/days of such notice. I also understand that this Co-Signer A | and I have commodered and can check my credentials including and Rental History, I am not applying to read and on the Rental Agreement. I have read Deposit Agreement, and I promise to gua Agreements. I understand that I may be read the for which the Landlord could be assess that costs as are incurred because of the Tenant fails to pay. The provided History and I have read the read that I may be read the second that I may be read that I may be re | g a Credit nt nor occupy the Rental rantee the equired to pay sed, damage ant under the |
| Co-Signer | Date | |
| Accepted by Owner/Manager | Date | |