



Stegner Property Management, LLC

Phone: 970-420-2191
Fax: (866) 775-6473
1213 Montgomery St.
Fort Collins, CO 80524

Email: jim@stegnerrentals.com
Website: www.stegnerrentals.com

CO-SIGNER APPLICATION

\$30.00 Application Fee per Person – Non Refundable

You must be 18 years of age to apply for or co-sign on a lease/rental agreement.

Please complete all requested information on this form. Thank you for applying to co-sign. If you pay by check and your check bounces, you will be assessed a \$30.00 fee.

Date of Application _____

PLEASE BE SURE TO FILL OUT ALL INFORMATION COMPLETELY AND TO SIGN THE LAST PAGE

PERSONAL INFORMATION

CO-SIGNER'S FULL NAME (Print Clearly) _____

Home Phone _____

Cell Phone _____

Email Address _____

Date of Birth _____ SSN _____

Driver's License Number/State _____

RESIDENCE INFORMATION

PRESENT ADDRESS _____

City/State/Zip _____

Dates at this Address _____ to _____ Present Phone Number _____

Present Landlord/Mortgage Co. _____

Present Landlord Phone Number _____

EMPLOYMENT INFORMATION

Present Employer _____ Dates Employed _____ to _____

Employer's Address _____ Phone _____

Position _____ Supervisor _____ Gross Monthly Salary _____

If Less Than One Year, Please List Previous Employer _____

Dates Employed _____ to _____

Employer's Address _____ Phone _____

Position _____ Supervisor _____ Gross Monthly Salary _____

OTHER INFORMATION

If there are other sources of income you would like to have considered, please list:

Amount _____ Per _____ Source _____ Phone _____
Amount _____ Per _____ Source _____ Phone _____

The application fee is \$30.00 per person and is non-refundable.

PLEASE NOTE, OUR CRITERIA FOR APPROVING A CO-SIGNER IS THE CO-SIGNER MUST BE A PROPERTY OWNER AND HAVE A CREDIT SCORE OF AT LEAST 650.

APPLICATION AND AUTHORIZATION:

This release and authorization acknowledges that **Stegner Property Mgmt** may conduct a verification of my current and previous tenant history, current and previous employment, credit history, contact personal references, and to receive any criminal history information pertaining to me which may be in the files of any Federal, State, or Local criminal justice agency, and to verify any other information deemed necessary to fulfill the Co-signer requirements. The results of this verification process will be used to determine Co-signer eligibility under **Stegner Property MANAGEMENT** tenant policies.

I have read and understand this release and consent, and I authorize the background verification. I authorize persons, schools, current and former employers, current and former landlords and other organizations and Agencies to provide **Stegner Property Mgmt.** with all information that may be requested. I hereby release all of the persons and agencies providing such information from any and all claims and damages connected with their release of any requested information. I agree that any copy of this document is as valid as the original.

I understand that the Landlord or his Agent(s) have a right to reject my application as co-signer. I also verify that all information provided is true and correct.

I hereby acknowledge receiving and reading a copy of Stegner Property Management, LLC lease_____ (initial).

Sign

Date



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CO-SIGNER AGREEMENT (ADDENDUM TO LEASE/RENTAL AGREEMENT)

This agreement is attached to and forms a part of the Rental Agreement which goes into effect on _____ between (“Owner” or “Landlord”), by and through **STEGNER PROPERTY MANAGEMENT, LLC**(“Landlord’s Agent”) hereinafter collectively called “**Landlord**” and:

(list all tenants names) _____ as Lessee, hereinafter called, whether one or more, “**Tenant**”. The Tenant has applied for and if approved is signing a lease for the following property address: _____.

I/We, the co-signer/s _____ have completed a Co-Signer Application/s for the express purpose of enabling the Landlord to check my credit. I have received a copy of and read the Rental Agreement, and I promise to guarantee the Tenant’s compliance with the financial obligations of this Agreement. I understand that I may be required to pay, (this may include but is not limited to) money due for rent, cleaning charges, late rent fees, non-sufficient fund checks, utilities, pet damage or damages of any kind. I/We agree to comply with and uphold all the terms of the lease agreement. I/We understand that the security and/or pet deposit refund at the end of the lease term(s), if any, shall go to the person(s) whose name is/are on the lease and not to me/us. I also understand that this Co-Signer Agreement will remain in force throughout the entire term of the tenant’s tenancy, even if their tenancy is extended and/or changed in its terms.

Should legal action be necessary concerning this agreement, the jurisdiction and venue for such action will be held in Larimer County in the State of Colorado.

IN WITNESS WHEREOF our signature/s are given below binding the terms and conditions of this co-signer agreement and binding each co-signer **JOINTLY AND SEVERALLY** to the payment of the within agreed and to the performance of all conditions and requirements of the Lease to which they are co-signing. **THIS IS A LEGAL DOCUMENT, IF NOT UNDERSTOOD, LEGAL COUNSEL SHOULD BE CONSULTED BEFORE SIGNING.**

I/WE HAVE READ, UNDERSTAND, AND HAVE BEEN FURNISHED A COPY OF THIS LEASE AND AGREE WITH THE ITEMS HEREIN.

Co-Signer Name (please print): _____ Relationship to Tenant: _____

Co-Signer Signature: _____ Date of Signature: _____

Co-Signer Name (please print): _____ Relationship to Tenant: _____

Co-Signer Signature: _____ Date of Signature: _____

Please attach very clear, legible copy of Drivers License for signature matching purposes

Accepted by Landlord: _____ Date: _____