

## PARENT GUARANTEE FORM

### To Guarantee Performance and Payments of Lease

<b>Student/Tenant's</b> <b>Full Name:</b> _____	Unit Name/#: _____	Total Lease\$ Rent/Mon \$ _____ x _____ Months = \$ _____
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<b>Parent(s)/Guarantor Information</b> (please PRINT clearly)	<b>Guarantee Date:</b> _____
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Guarantor1: \_\_\_\_\_ Social Security# (required) \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_ Date of Birth: \_\_\_\_\_  
last name first name(s) middle initial

Address1: \_\_\_\_\_ ☐ Rent Home ☐ Own Home  
street address city state zipcode

Contact1: \_\_\_\_\_  
home phone with area code cell/mobile phone with area code work phone with area code eMail address

Guarantor2: \_\_\_\_\_ Social Security# (required) \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_ Date of Birth: \_\_\_\_\_  
last name first name(s) middle initial

Address2: \_\_\_\_\_ ☐ Rent Home ☐ Own Home  
street address city state zipcode

Contact2: \_\_\_\_\_  
home phone with area code cell/mobile phone with area code work phone with area code eMail address

Relationship to Tenant/Student: ☐ Parent ☐ Grandparent ☐ Legal Guardian ☐ Relative (as aunt, uncle): \_\_\_\_\_

Preferred Contact Method: ☐ Home phone ☐ Cell phone ☐ Work phone ☐ Email Time: ☐ Day ☐ Evening

<b>Employment</b> (please list your Current employer and spouse's employer if applicable). If not employed, please list source of funds below. MAY WE CONTACT THESE? <input type="checkbox"/> No <input type="checkbox"/> Yes
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Guarantor1  
 Employer: \_\_\_\_\_  
Company name city state position and duties ave hours/week starting date leaving date pay rate/salary

Supervisor's name supervisor's title supervisor's phone# w/ area code notes

Guarantor2  
 Employer: \_\_\_\_\_  
Company name city state position and duties ave hours/week starting date leaving date pay rate/salary

Supervisor's name supervisor's title supervisor's phone# w/ area code notes

If not employed now, please note source of funds: ☐ Savings accounts ☐ Pension ☐ Social Security ☐ Other: \_\_\_\_\_

### Parent(s) / Guarantor Agreement

**"I/We unconditionally and absolutely guarantee payment of all rents and other charges under the Lease Agreement for the tenant/student and unit named above. I understand and agree that the Lease Agreement provides that the tenants are both jointly and severally responsible for the payment of rent and other charges including but not limited to late fees, repair costs for damages, fines by a HomeOwners Association plus attorney & collections fees incurred in enforcement of the lease."**

**"I /We understand Holmes Property Management LLC is not obligated to exhaust remedies from tenants first and can hold Guarantor(s) responsible at any time."**

**"I /We authorize Holmes Property Management LLC to investigate all information given plus secure more Information as needed. Additional information may include but is not limited to verification of employment, personal and employment references, landlord references, criminal reports, credit reports, and other sources."**

**"I /We understand units are not held without complete Applications, Parent Guarantees, Signed Leases and Down Payments. Down Payment is first month's rent + deposit"**

**"I/We have read and agree to all provisions and understand that this Guarantee may be accepted or rejected for any reason or for no reason."**

<b>X</b> _____ <small>Signature of Guarantor 1 Date</small>	<b>X</b> _____ <small>Signature for Credit Report (I authorize the release of my Credit Report)</small>
<b>X</b> _____ <small>Signature of Guarantor 2 Date</small>	<b>X</b> _____ <small>Signature for Credit Report (I authorize the release of my Credit Report)</small>

Please Note: This Document must be Notarized below (Bank or Financial Institution must witness your signature and confirm your identity).

STATE OF \_\_\_\_\_  
 COUNTY OF \_\_\_\_\_

Personally appeared before me, \_\_\_\_\_  
 with whom I am personally acquainted, or have shown proper identification and who acknowledged that he/she/they executed the within instrument for the purposes therein contained.  
 Witness my hand and official seal this the \_\_\_\_\_ day of \_\_\_\_\_, \_\_\_\_\_

NOTARY PUBLIC \_\_\_\_\_  
 My Commission Expires \_\_\_\_\_