

CO-SIGNER'S LEASE APPLICATION

Property Address: _____ Apt. _____ Rent \$ _____ Agent _____

Lease Begin Date _____ End Date _____ Today's Date _____

Chicago Apartment Place, Inc., 3654 N. Lincoln, Chicago, IL. 60613 Tel: (773) 472-6859 Fax: (773) 472-4738

Please print clearly and fill out application completely

CO-SIGNER APPLICANT Name:	Date of Birth:	Driver's License #:	Social Security #:	Home Phone:	
					Cell Phone:
Address:	City,	Current Rent:	Lease Expires:	Duration of Tenancy:	
	State:				
	ZIP:				
Present Landlord:				Phone:	
Your e-mail address:					
Current Employer:			Monthly Salary:		

IN CASE OF EMERGENCY, PLEASE CONTACT

Name:	Address:	Phone:	Relationship:
	City, State Zip:		

I certify that all of the information in this application is true and correct. I hereby apply for and offer to lease the apartment described for the lease term stated, at the rent and on the conditions set forth herein and Lessor's standard lease form. I understand that no pets are allowed without prior written approval. I understand that, as is customary in the business, in compliance with Fair Credit Reporting Act, routine inquiries may be made concerning my tenancy. An investigative or credit report will be made which may include information as to my character, general reputation, personal characteristics and mode of living. The investigation may include information obtained through personal interviews concerning marital status, number of children, employment, occupation, general health, habits, reputation mode of living and residence verification.

Co-Applicant's Signature

Please provide a copy of your photo identification