

KAMINS REAL ESTATE— MASSACHUSETTS GUARANTOR STATEMENT

Guarantor must completely fill out and return to our office - DO NOT ALTER or CHANGE

APARTMENT APPLIED# _____ ADDRESS/COMPLEX: _____

GUARANTOR NAME: _____ SOCIAL SECURITY : _____ - _____ - _____

ADDRESS: _____

TEL. NO.: _____ LENGTH OF RESIDENCY: _____

LANDLORD/OWN: _____ TELEPHONE #: _____

EMAIL: _____

OCCUPATION OR SOURCE OF INCOME: _____

EMPLOYER: _____ HOW LONG: _____ YR. SALARY: _____

ADDRESS: _____ PHONE#: _____

NAME OF SPOUSE: _____ OCCUPATION: _____

EMPLOYER: _____ HOW LONG: _____ YR. SALARY: _____

ADDRESS: _____ PHONE#: _____

CREDIT REFERENCES: (Credit cards, car payments, cell phone, etc.):

(1) NAME: _____ TELE. #: _____

ADDRESS: _____

(2) NAME: _____ TELE. #: _____

ADDRESS: _____

BANK NAME: _____

SAVINGS: _____ ADDRESS: _____

CHECKING: _____ ADDRESS: _____

The undersigned agree(s) to be responsible for performance of the terms of this joint and several lease in the event of default by the Lessee(s) herein as an inducement to the Lessor to let said premises to the Lessee(s) wherefore, witness our hands and seals. If a new lease is signed between the Lessee(s) and Lessor, or if the Lessee(s) and Lessor continue under any new tenant relationship, this statement will continue to be in effect.

SIGNATURE: _____ DATE: _____

NOTARY PUBLIC: _____ DATE: _____

GUARANTOR STATEMENT WILL NOT BE ACCEPTED UNLESS NOTARIZED