KAMINS REAL ESTATE- MASSACHUSETTS GUARANTOR STATEMENT

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:	
	PHONE#:	
CREDIT REFERENCES: (Credit cards, car payments, cell phone, etc.):		
(1) NAME:	TELE. #:	
ADDRESS:		
(2) NAME:	TELE. #:	
ADDRESS:		
BANK NAME:	ADDRESS:	
CHECKING:	ADDRESS:	

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

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

Phone: (413) 253-2515