

Atrium Apartments, 1306 N. Lincoln Ave. Urbana, IL 61801
217-328-5122, Fax 270-568-3200
Co-Sign Rental Application
(Please Print)

Co signing for: _____

Your Name _____ SS # _____ DOB _____

Address _____ City/ State _____ Zip _____

Driver's License/ State ID # _____

Home Phone # _____ Home email address _____

Place of Employment _____ Occupation _____ Time on job _____

Address _____ City/ State _____ Zip _____

Work Phone # _____ Work Fax # _____ Work Email _____

Monthly Income _____ Other Income _____ Payments/Debts _____

Have you ever declared bankruptcy? _____

Have you ever been sued for nonpayment of bill? _____

Spouses Name _____ SS # _____ DOB _____

Driver's License/ State ID # _____

Place of Employment _____ Occupation _____ Time on Job _____

Address _____ City/ State _____ Zip _____

Work Phone # _____ Work Fax # _____ Work Email _____

Monthly Income _____ Other Income _____ Payment/Debts _____

Two personal references of people not living with you

1) Name _____ Phone _____ Relationship _____

2) Name _____ Phone _____ Relationship _____

Credit Card: This information will remain confidential along with your credit report.

1) Type of card _____ Card # _____ Exp Date _____

2) Type of card _____ Card # _____ Exp Date _____

3) Type of card _____ Card # _____ Exp Date _____

The undersigned persons represent that all the above statements are true and complete and hereby authorize verification of such information via credit reports, rental history reports, and other means. False information given above shall entitle owner to 1) reject this application, 2) retain the application fee and 3) terminate the resident's right of occupancy.

Signature of Applicant _____ Date _____

Signature of Applicant's Spouse _____ Date _____