

(814) 237-5598 - Telephone

(814) 237-9021 - Fax



(814) 238-2550 – Telephone (814) 237-9021 - Fax

701 Cricklewood Drive State College, PA 16803 Toll Free 1-800-4-TOFTREES 1-800-486-3873

RE: Lease between ______ and Toftrees Associates for Apartment located at ______, State College, PA 16803

GUARANTOR ACCEPTANCE:

has applied to rent an apartment from Toftrees Associates with one or more other residents. The apartment will be leased to these residents on a joint and several basis which means that each resident can be held responsible for full performance under the lease. The Landlord has to verify that I/we are the responsible parties and I/we agree to assume responsibility for his/her actions should there be a failure to pay the rental or failure to follow the rules and covenants of the lease and any renewals of the lease.

I/We agree to guaranty performance by______ for payment of all amounts due including rent and all other charges.

(1)			
Signature	Relationship to Resident	Date	
-	-		
(2)			
Signature	Relationship to Resident	Date	

If this form is executed on behalf of a son/daughter, both parents must sign it. If one parent is deceased, or the parents are separated/divorced and one parent has sole financial responsibility, this form must be accompanied by a notarized statement to that effect signed by the responsible parent.

GUARANTOR INFORMATION

(1)_

Social Security Number

 $(2)_{-}$

Social Security Number

(1)

Driver's License Number/State

(2)

Driver's License Number/State

For Cooper's Pond Toftrees Associates/Turtle Creek Toftrees Associates Use Only