

CO-SIGNER APPLICATION
OAK HILL INVESTMENT, L.L.C.
5330 Heatherdowns Blvd., Suite 201
Toledo, Ohio 43614
(419) 866-1160
(419) 866-6634 – FAX

Complex _____ Apt. # _____ Monthly Discounted Rent _____
(FOR OFFICE USE ONLY)

REQUIREMENTS TO CO-SIGN:

- All Co-signers must have a gross monthly income equal to 3 times or more than the monthly rent. We must be able to verify gross income through the employer.
- Having at least some current positive credit accounts.
- Negative information obtained from the Co-signer's credit report or any other source may result in denial of the application.
- If any of the information given in the application is found to be materially incomplete or inaccurate, the application may be denied.

Name _____ SSN# _____

Driver's License No. _____ Phone () _____

Present Address _____
(Street) (City) (State) (Zip)

How Long _____ Monthly rent/mortgage _____ Landlord/Lender _____

Previous Address _____
(Street) (City) (State) (Zip)

How Long _____ Monthly rent/mortgage _____ Landlord/Lender _____

Employer _____ Date Started _____

Address _____ Phone () _____

Position _____ **Gross Weekly** _____

Current Bank _____ Branch _____

Type of Acct.(s) _____

List credit accounts:

Name of Company _____ Monthly Payment _____ Balance Due _____

Name of Company _____ Monthly Payment _____ Balance Due _____

Name of Company _____ Monthly Payment _____ Balance Due _____

I hereby authorize any person or company to supply you with any information requests concerning the information contained herein. If any of said information is found to be materially incomplete or inaccurate, the management may cancel the lease.

I expressly authorize Oak Hill Investment, L.L.C. or It's agent (including a collection agency) to obtain my consumer credit report, which Oak Hill Investment, L.L.C. or It's agent may use if attempting to collect past due rent payments, late fees, or other charges from me, both during the term of the lease and thereafter.

SIGNATURE _____ DATE _____