

Golfside Apartments
1099 Maiden Lane
Ann Arbor, MI 48105
ph (734) 665-4331 fax (734) 665-2354
email:leasing@golfsideapts.com
www.golfsideapts.com

Guarantor Authorization

In consideration of Golfside Apartments, leasing the premises described as

_____ Apt # _____ to _____

I do hereby sign this document as guarantor of the timely performance of his/her rental and damage responsibility under the first lease term and all subsequent renewals and extensions.

As guarantor, I understand that I must enclose proof of my income, being a letter of employment stating my hire date and my monthly income or a copy of my most recent paycheck stub. I also understand that there will be a credit check done.

Guarantor's Name

Address _____ City _____

State _____ Zip _____

Home Phone _____ Work Phone _____

Cell Phone _____ E-Mail _____

Occupation _____ Employer _____

Yearly Income _____

Social Security Number _____

Guarantor Signature _____ Date _____

Notary Signature _____

Name (please print) _____

Notary Address _____

Date signed _____ Notary Expiration Date _____

PLEASE PRINT AND FAX TO 734-665-2354
Thank You!

[Golfside Homepage](#)