

**OLYMPIA HOUSE DELAWARE LP**  
12 EAST 44<sup>TH</sup> STREET  
6<sup>TH</sup> FLOOR  
NEW YORK, NY 10017  
TEL. (212) 370-9111  
FAX. (212) 370-9456

**Guarantor Application Instructions**

If you are employed by a company, please submit for each applicant:

1. An employment letter describing your position, the date of employment and annual salary.
2. Copies of 3 recent pay stubs.
3. The first page of your 2 most recent bank statements (checking & savings).
4. Landlord reference letter stating how long you have been there, your rent responsibilities, and whether you have paid your rent in a timely fashion.
5. Copy of United States photo id.
6. The attached Guarantor Application.

If you self-employed, please submit for each applicant:

1. The first 2 pages of last two years' tax returns (1040).
2. Most recent bank statements (checking & savings)
3. Landlord reference letter stating how long you have been there, your rent responsibilities, and whether you have paid your rent in a timely fashion.
4. Copy of photo id.
5. The attached Apartment Lease Application.

Once approved, we will require certified checks, cashier's checks or money orders, which should be made payable to:

Ist Month's Rent		Payable to:	OLYMPIA HOUSE DELAWARE LP
Security Deposit		Payable to:	OLYMPIA HOUSE DELAWARE LP
Processing Fee	\$100.00	Payable to:	OLYMPIA HOUSE DELAWARE LP

**Olympia House Delaware LP**

12 East 44<sup>th</sup> Street  
6<sup>th</sup> Floor  
New York, NY 10017

GUARANTOR APPLICATION

House No. \_\_\_\_\_ Apartment \_\_\_\_\_ No.  
Rooms \_\_\_\_\_  
Term of  
Lease \_\_\_\_\_ From \_\_\_\_\_ To \_\_\_\_\_  
Rent per Month \_\_\_\_\_  
Security \_\_\_\_\_  
Applicant's  
name \_\_\_\_\_

1. Guarantor's name \_\_\_\_\_ Age \_\_\_\_\_ Social Security  
# \_\_\_\_\_

2. Present  
Address \_\_\_\_\_  
Phone \_\_\_\_\_

3. Business or  
employer \_\_\_\_\_  
Phone \_\_\_\_\_  
Address \_\_\_\_\_  
Length of employment \_\_\_\_\_ Type of  
Business \_\_\_\_\_  
Position in office \_\_\_\_\_  
Income \_\_\_\_\_  
Additional source of  
income \_\_\_\_\_

4. Present  
Landlord \_\_\_\_\_  
Address \_\_\_\_\_  
Phone \_\_\_\_\_  
How long a tenant \_\_\_\_\_ Reason for  
moving \_\_\_\_\_

5. References (personal)

Name \_\_\_\_\_ Phone \_\_\_\_\_  
Address \_\_\_\_\_

6. References (business to verify employment)

Name \_\_\_\_\_ Phone \_\_\_\_\_  
Address \_\_\_\_\_

7. Credit cards (for charge account name only) \_\_\_\_\_

8. Name of Bank \_\_\_\_\_ Checking \_\_\_\_\_  
Savings \_\_\_\_\_

Address \_\_\_\_\_  
Account # \_\_\_\_\_

Name of Bank \_\_\_\_\_ Checking \_\_\_\_\_  
Savings \_\_\_\_\_

Address \_\_\_\_\_  
Account # \_\_\_\_\_

9. In case of emergency  
notify \_\_\_\_\_

1. Applicant authorizes broker and or landlord to run a consumer agency credit report.
2. The landlord assumed no responsibility to the applicant for delay in giving possession, due to failure of present occupant to vacate at termination of lease, or for any other reason, except that applicant will be credited with an allowance equal to the daily amount of Rent, multiplied by the actual number of days for which possession cannot be given, and the tenant agrees to accept the lease subject to such conditions.

\_\_\_\_\_  
Guarantor's Signature

OLYMPIA HOUSE DELAWARE LP

\_\_\_\_\_  
Landlord

Apt # \_\_\_\_\_

At: \_\_\_\_\_

\_\_\_\_\_

Gentlemen,

This letter shall serve as my agreement to guarantee the above lease on behalf of

\_\_\_\_\_ the tenant.

I agree to be liable to the owner for Rent due that is not paid by the tenant, including future renewals. Furthermore, I agree to guarantee the performance by the tenant of this lease as if I was named tenant, including future renewals.

This letter is tendered to induce the owner to execute a lease with the proposed tenant.

Guarantor understands that Rent is due on the First of each and every month. If tenant is unable to pay Rent by the sixth of the month, Guarantor will be responsible to pay all past due Rent.

A copy of this letter shall be attached to each copy of the lease executed by the owner and tenant.

Date: \_\_\_\_\_ 20 \_\_\_\_\_

\_\_\_\_\_  
Guarantor's Signature

Sworn to before me on

This \_\_\_\_\_ day off \_\_\_\_\_ 20 \_\_\_\_\_

\_\_\_\_\_  
Guarantor's Name

\_\_\_\_\_  
Guarantor's Address

\_\_\_\_\_  
City, State, Zip Code

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**Guarantor's Social Sec #**

THIS FORM MUST BE NOTARIZED SHOWING  
THE NOTARY'S SEAL AND RETURNED IN THE  
ORIGINAL TO AGENT