PARENTAL OR SPONSOR GUARANTY

Apartment Community (the "Community")		Resident/Residen	it Name	
In consideration for, and as an induc	cement to us in making	the Lease to	Resident, and for other good and valua	ble
			, you, as Guarantor, guarantee irrevocat	
absolutely and unconditionally, to us as	nd our successors and a	ssigns, the full p	performance and prompt observance of all	the
agreements and conditions of the Leas	e and of any amendmen	ts, revisions or r	enewals of the Lease (and all documents the	ha
are a part of the Lease), including, b	ut not limited to, the pa	yment of Rent	and other sums due under the Lease. Y	'οι
acknowledge that you have a relations	hip with the Resident an	d as a result of	that relationship you will derive a substan	tia
benefit from the making of the Lease to	Resident. Once you sig	n this Guaranty	it is your legal obligation to pay us sums d	lue
under the Lease. To the extent permitt	ted by law, you hereby v	aive any legal o	defenses to this Guaranty based on notice	; 0
acceptance, presentment, demand, no	tice of protest, notice of	dishonor or def	fault, and notice of any changes, renewals	0
modifications. Unless we are seeking n	noney from you for your	payment respon	isibilities under this Guaranty, we do not ha	ì∨€
to provide any notices to you. You here	by waive each and every	notice to which	you or the Resident might be entitled to und	de
the Lease, or otherwise, including, with	out limitation, notice of a	iny breach or de	efault by you or the Resident. Once any su	ms
are due under the Lease we may colle	ect them from you withou	t making efforts	s to sue or otherwise try to collect such su	ms
from the Resident. This is a guaranty of	of payment and performa	nce and not of	collection and your liability is primary and i	no
secondary. You expressly waive any o	lefenses based upon an	y applicable sta	tute of limitations, failure of us to enforce t	the
Lease against the Resident, any failure	to give notice of default	to the Resident	or other notices due under the Lease and a	ını
duty to give you notice of facts about the	ne Resident to the extent	permitted by la	w. We may, on one or more occasions, in o	ou
sole discretion, waive terms of the Leas	se, grant concessions or	other indulgence	es to the Resident all without any notice to y	/Οι
or effect on your obligations under this	Guaranty. Any obligation	ns Resident ha	s to you are subordinate to Resident's Lea	356
obligations to us. As used in this Guard	anty, the term "you" shal	l also include al	I other persons claiming by, through or und	de
you, including your heirs or personal rep	oresentatives. You may n	ot assign your o	bligations under this Guaranty to anyone el	se
Your liability under this Guaranty conti	nues in full force and ef	ect even if the	Resident becomes incapacitated, disabled	0
bankrupt. You are not released from yo	ur guarantee obligations	until we have be	een fully paid all sums due under the Lease	ا . د
we institute any legal proceedings aga	inst you to enforce this	Guaranty and pr	revail in such action, you will be liable for t	the
costs and expenses of such action incur	rred by us, including our r	easonable attorr	neys' fees, in addition to any amounts award	lec
to us in such action. You consent to the	e jurisdiction of, and veni	ue in, any local d	<u>or state court otherwise having subject mat</u>	tte
jurisdiction and located within Co	ounty in the State of	. Your sigi	nature below confirms that you have had t	the
opportunity to read and understand this	Guaranty and to consult	legal counsel if	you so desire.	
The undersigned authorizes a credit ar	nd/or criminal screening r	eport to be proc	essed and verification of information provid	dec
below.				
IN MUTNESS MUTERESS II				
IN WITNESS WHEREOF, the undersignment of the unders	ned has executed this G	uaranty.		
				_
(Guarantor)	Date	(Landlord)	Date	,
RELATIONSHIP TO RESIDENT (i.e. Mother, Fat	her, Grandfather, And Grandn	other):		
BILLING ADDRESS:			TELEPHONE:	
COCIAL CECUDITY NUMBER (CELL DUONE NUMBER		EMAIL ADDDE	
SOCIAL SECURITY NUMBER (required):	CELL PHONE NUMBER:		EMAIL ADDRE	
			1	

MONTHLY INCOME:

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DATE OF BIRTH: