



739 Lincoln Avenue, Charleston, IL 61920

Office: 217.345.7368 Fax: 217-512-2283

LEASE GUARANTEE

The undersigned, as Guarantor, in consideration of Owner/Lessor entering into a lease with:

Lessee: _____ Located at: _____
(Name of tenant) Charleston, IL 61920

Guarantor specifically agrees that this guarantee is and shall be an open and continuing guarantee and all obligations and liabilities to which it applies or may apply shall be conclusively presumed to have been created in reliance hereon and shall continue in full force and effect, notwithstanding any change in rentals or other obligations under the lease, renewals, modifications, additions, extensions, or replacements thereto or extensions of time to perform any of the obligations thereunder.

Guarantor specifically agrees that this is an absolute guarantee of all of the duties and obligations of lessee and that guarantor is liable immediately upon default of the lessee without any duty upon owner/lessor to attempt collection from lessee before initiating collection efforts against guarantor for any and all such defaults, Guarantor expressly acknowledges that lessee's duties and obligations to owner/lessor include joint and several liability with all other persons entering into leases with owner/lessor for the aforementioned residential unit or any residential unit lessee may rent from owner/lessor during the term of any and all leases entered into by and between lessee and owner/lessor. _____ to _____. If there are one or more guarantors, liability of each Guarantor shall be joint and several. **Acceptable Lease Guarantee(s) is a parent or legal guardian. Unique Homes Properties Management must approve anyone other than a parent or legal guardian. Unique Homes Properties Management reserves the right to deny a Lease Guarantor they deem unacceptable.**

*****THIS FORM MUST BE NOTARIZED*****

GUARANTOR (S):

1.) _____ Date: _____
(Printed Name) (Signature)
Relationship to lessee: _____ SSN# _____ - _____ - _____
Address: _____ Driv. Lisc.# _____
City, State _____ Zip Code _____ Phone: (_____) _____

2.) _____ Date: _____
(Printed Name) (Signature)
Relationship to lessee: _____ SSN# _____ - _____ - _____
Address: _____ Driv. Lisc.# _____
City, State _____ Zip Code _____ Phone: (_____) _____

Notary Public:

Subscribed & sworn to me this _____ day of _____ 20_____.

Notary Public Seal:

*****THIS FORM NEEDS TO BE SIGNED BY GUARANTOR (S) IN THE PRESENCE OF A NOTARY PUBLIC****