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## CO-SIGNOR APPLICATION AND AGREEMENT FORM

Resident(s): \_\_\_\_\_ Apt. Address: \_\_\_\_\_

**Please complete in full and print clearly.**

**All information given is kept strictly confidential.**

### TELL US ABOUT YOURSELF:

What relationship are you to the resident(s)? Parent  Brother or Sister  Employer

Other (Please explain) \_\_\_\_\_

Last Name: \_\_\_\_\_ First Name: \_\_\_\_\_ Middle: \_\_\_\_\_

S.I.N. #: \_\_\_\_\_ Date of Birth: \_\_\_\_\_ Monthly Income: \_\_\_\_\_

Home Phone: \_\_\_\_\_ Business Phone: \_\_\_\_\_

E-mail: \_\_\_\_\_

Bank Name: \_\_\_\_\_ Branch #: \_\_\_\_\_

Account #: \_\_\_\_\_ Credit Card #: \_\_\_\_\_

Expiry Date: \_\_\_\_\_ Visa \_\_\_\_\_ Mastercard \_\_\_\_\_ American Express \_\_\_\_\_ Other \_\_\_\_\_

Driver's License Number: \_\_\_\_\_ Expiry Date: \_\_\_\_\_

License Plate Number: \_\_\_\_\_ Make of Auto: \_\_\_\_\_ Year: \_\_\_\_\_

Present Address: \_\_\_\_\_

City/Province: \_\_\_\_\_ Postal Code: \_\_\_\_\_

Move-In Date: \_\_\_\_\_ Amount of Rent Paid: \_\_\_\_\_ Amount of Mortgage Paid: \_\_\_\_\_

Present Landlord's Name: \_\_\_\_\_ Landlord's Phone Number: \_\_\_\_\_

Prior Address: \_\_\_\_\_

City/Province: \_\_\_\_\_ Postal Code: \_\_\_\_\_

Move-In Date: \_\_\_\_\_ Move-Out Date: \_\_\_\_\_ Amount of Rent Paid: \_\_\_\_\_  
Amount of Mtge Paid: \_\_\_\_\_

Prior Landlord's Name: \_\_\_\_\_ Landlord's Phone Number: \_\_\_\_\_

**EMPLOYMENT HISTORY:**

Present Employer: \_\_\_\_\_ Bus. Phone #: \_\_\_\_\_

Length of Employment: \_\_\_\_\_ Occupation: \_\_\_\_\_

Previous Employer: \_\_\_\_\_ Bus. Phone #: \_\_\_\_\_

Length of Employment: \_\_\_\_\_ Occupation: \_\_\_\_\_

Income Sources if not employed: 1) \_\_\_\_\_ 2) \_\_\_\_\_

I certify that the above information is complete and correct and I understand that this application may be revoked if any information furnished upon this application is found to be incorrect or deemed to be incomplete.

I authorize AON Inc. and its agents to exchange my personal information on an ongoing basis with credit bureaus and permit such organizations to verify my personal information in order to protect me. This is to ensure the completeness of the information and maintain the integrity of the credit granting system. I authorize AON Inc. to co-operate with local, provincial and national authorities in the investigation of unlawful or improper activities in order to protect AON Inc. and myself from fraudulent transactions. I also authorize AON Inc. to obtain a personal credit report related to this application and to verify directly the information I have supplied above.

I authorize verification of the above information, references, and credit record. The undersigned hereby consents to the collection and use of personal information about me in accordance with The Personal Information Protection and Electronic Documents Act.

→ Co-Signor's Signature: \_\_\_\_\_ Date: \_\_\_\_\_

**AGREEMENT FORM**

Resident(s): \_\_\_\_\_ Apartment: \_\_\_\_\_

In consideration of AON Inc.® agreeing to rent the above noted apartment to the above resident(s), the undersigned hereby covenants and agrees, as if a primary debtor and not a mere guarantor, that the undersigned will make all rent payments and other obligations required to be made by the above named resident(s). Further, AON Inc.® shall not be required to exhaust remedies against the said resident before making a demand on the undersigned. **THIS AGREEMENT IS FOR THE ENTIRE LENGTH OF THE TENANCY AND OBLIGATION PERIOD OF THE TENANCY.**

Dated at \_\_\_\_\_, this \_\_\_\_\_ day of \_\_\_\_\_ 20\_\_\_\_\_.

→ \_\_\_\_\_  
Witness Signature

→ \_\_\_\_\_  
Co-Signor's Signature