

Tuscan Bend Apartments

3009 SW Archer Road, Gainesville FL 32608

352/377-0555

FAX 352/377-1832

www.tuscanbend.com

CONTINUING PARENTAL OR SPONSOR GUARANTY * THIS FORM MUST BE NOTARIZED !!!**

The person(s) whose names are signed below execute this Guaranty Agreement. It is understood that _____ has applied to become a Resident at Tuscan Bend Apartments, Gainesville FL.

The undersigned, as _____ of Resident, in order to induce Tuscan Bend Apts to lease an apartment to _____ (Relationship to Tenant) (Tenant's Name) hereby guarantees to said Landlord the performance of the

above named Resident and all their duties and obligations under such Lease and all subsequent leases, and the prompt and unconditional payment of each and every obligation of Resident under the terms of the lease.

The undersigned Guarantor consents that the obligation of Tenant for the liabilities hereby guaranteed may be renewed, extended, modified, released or surrendered, all without affecting the obligations of the undersigned Guarantor. This Guaranty shall be an absolute and unconditional Guaranty of payment and shall continue after the term of said lease until all obligations and payments of Tenant are fully satisfied. Landlord may enforce this Guaranty without being obligated to resort first to any security or any other remedy against Resident.

The Guarantor understands and agrees as follows:

- In addition to other amounts guaranteed, Guarantor agrees to pay a reasonable attorney's fee and all costs imposed under the terms of the Lease or required or appropriate in enforcement of this guaranty.
- By signing this form, the guarantor authorizes the Landlord to make or have any credit report, employment or investigative inquiries the Landlord deems necessary.
- This Guaranty may be enforced against Guarantor(s) without the necessity of recourse against Resident or any other parties responsible. Guarantor(s) consent(s) that any proceedings to enforce this Agreement or related rights may be brought before the court sitting in the judicial district or circuit in which the apartments are located, and Guarantor(s) consent to personal jurisdiction of such courts and agree that they may be served with process by certified mail addressed to them at the address shown below. Any actions to enforce this Guaranty shall be governed by the laws of the state in which the apartments are located.

Guarantor Signature Date Guarantor Signature Date

STATE OF _____ COUNTY OF _____

SWORN TO AND SUBSCRIBED BEFORE ME THIS _____ DAY OF _____, 200__.

(Notary Public Signature) Commission Expiration Date & Seal

This section to be completed by Guarantor:

Guarantor's Name: _____

Address: _____ City _____ State _____ Zip _____

Date of Birth: _____ Social Security # _____

Employer _____ Employer Phone # _____

Home Phone # _____ E-mail Address: _____