UNCONDITIONAL GUARANTY OF LEASE

CMG Leasing

Date: _____

In consideration of the making of the attached lease # _____ by CMG Leasing (Lessor) with the Lessee shown below, the Insurer hereby guarantees payment of the rent to be paid by the Lessee and the performance by the Lessee for all of the terms and conditions of the Lease and any renewal or extension thereof.

The Insurer authorizes the Lessor to obtain a credit report in connection with the Insurer's application to become a Resident/Co-signer of _____. The Insurer understands that the Lessor will provide the name of the reporting agency obtaining this information upon request.

I (We), _____ (Guarantor(s)), will be responsible for any financial obligation for rent related services or damage incurred by _____ (Lessee) at _____.

This Guaranty shall continue and not be affected by amendments or changes in the lease which may be agreed to from time to time by Management and resident(s). Delay or failure by Management to exercise lease rights or to give any notice, demand or request to undersigned guarantor(s) shall not waive owner's rights under this Guaranty. This written guaranty is not required to be executed in the county or in the city where the dwelling unit is located, but it shall nonetheless be governed by and shall be construed under the laws of the Commonwealth of Virginia, including but not limited to Chapter 13.2 of Title 55 of the Code of Virginia (1950), as amended, generally known as the Virginia Residential Landlord and Tenant Act. The parties hereto further agree that the proper jurisdiction and venue for any litigation or disputes arising out of this written guaranty shall be in Montgomery County, Virginia.

The undersigned Guarantor has caused this Guaranty to be executed on this _____ day of _____, 20_____.

_____ _____
Guarantor Signature Date

_____ _____ _____ _____
Site Manager Signature Date Guarantor Signature Date

INFORMATION ON PARTY(IES) SIGNING THIS AFFIDAVIT

Guarantor (Printed)	SS#	Guarantor (Printed)	SS#
Address		Address	
City State Zip		City State Zip	
Home Phone	Date of Birth	Home Phone	Date of Birth
Relationship to resident		Relationship to resident	
Employer	(phone)	Employer	(phone)
Position	Years	Position	Years
Address		Address	
City State Zip		City State Zip	
Email Address		Email Address	