

HEBREW FREE LOAN SOCIETY GUARANTOR FORM

Name of the organization whose loan you are seeking to guarantee: _____

Legal Name _____ S.S. # _____ Date of Birth _____

Street, Apt #, City, State, Zip Code _____

Marital Status (check one): Single Married Partnered Separated Divorced

Home Phone _____ Cell Phone _____ Email Address _____

Occupation/Job Title _____ Annual Income \$ _____

Employer/Business Name _____ Start Date (Month/Year) _____

Business Address _____ Business Phone _____

Relationship to Organization _____

Representations: By signing this form, you represent that all information provided in this application is true and complete.

Credit Report & Verification: By signing below, you authorize us to obtain your credit report. If you ask, we will tell you if a report has been obtained and the name and address of the agency furnishing the report.

Guarantor's Signature	Date	Spouse's Signature	Date

You may return this form directly to Daren Scott at dscott@HFSL.org or at the address or fax number indicated below, or return the form to the institution for which you are serving as guarantor.

* Hebrew Free Loan Society * 675 Third Ave, Suite 1905 * New York, NY 10017 *
* Phone: (212) 687-0188 * Fax: 212-682-1120 * Website: www.HFSL.org *

