

PARENT RESPONSIBILITY LETTER- Mountain Plaza Apartments

Date: \_\_\_\_\_

I/We, \_\_\_\_\_, agree to assume full responsibility for payments of rent for apartment # located at **Mountain Plaza Apartments**, (office phone 520-623-5600 and fax # 520-881-8195), as covered in the Rental Agreement signed by my son/daughter, delinquent with said rent and/or related charges.

I/We understand that monthly rent is \$\_\_\_\_\_, and shall be due and payable on or before the first calendar day of each and every month. I/We further understand my son/daughter and his/her roommate(s) are each jointly and individually responsible for upholding all terms of the Rental Agreement, including payment of the full amount of monthly rent.

This agreement shall remain in effect until the expiration date of said Rental Agreement, or for the entire period my son/daughter occupies the above referenced apartment.

Name (please print): \_\_\_\_\_ Social Security # \_\_\_\_\_

Name (please print): \_\_\_\_\_ Social Security # \_\_\_\_\_

Signed: \_\_\_\_\_ Date: \_\_\_\_\_

Signed: \_\_\_\_\_ Date: \_\_\_\_\_

Subscribed and sworn to before me this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_.

My commission expires: \_\_\_\_\_.

Notary Public: \_\_\_\_\_.