

Rue de l'Hôpital 4 CH-1700 Fribourg

GUARANTORS FORM Return back to: apartis@unifr.ch

I'm the guarantor of:

Name and Surname:

For the following accomodation (address) :

Guarantee: CHF

Rent per month including charges: CHF

Guarantor personal data:

Name:
Surname:
street:
postcode, place:
since:
papers left in:
mobile number:
email :
birth date:
marital status:
home town:
nationality:
profession:
number of children entitled to maintenance:
employer:
address of the employer:
professional telephone number:
since:
monthly net salary: CHF
your monthly rent: CHF
your landlords name:
your landlords address:

Are you under public guardianship? us no

For foreigners: in Switzerland since:

Permit for stay: B / C / other:

Your account IBAN:

In case of the approval of Apartis I take note that I will sign the lease contract with the above mentioned person and that Apartis can take legal steps against me concerning outstanding payments regarding the lease contract.

place: ______date: ______ signature: ______

enclosures:

- Actuel extract of the pursuit register
- Copy of your last salary calculation
- Copy of your identity card or stay permit (for foreigners)