Quincy Cottage Rental Application

Dates Attending: _____ to _____

Applicant Information

Name(s) of all adults occupying Quincy Cottage: _____

_____

Primary Contact Person: _____

Home telephone number: _____ Cell phone number: _____

Business telephone number: _____

Mailing Address: _____

Billing Address: _____

Employment Information

Employer Name/Company: _____

Address: _____

Job Title:

_____

Additional Information

Driver License Number/State issued: _____

Homeowner's Insurance Provider: _____

Name of all children and ages that will be occupying property (please use the back for additional space, if needed):

_____

_____

Number of Cars that will be parked at location: _____

License Plate #: _____ Year/Make/Model: _____

License Plate #: _____ Year/Make/Model: _____

License Plate #: _____ Year/Make/Model: _____

This form needs to be signed and either faxed or mailed before guarantying rental dates. Please also enclose your rental payment, deposit, and signed Terms and Condition form by all adults who will be occupying Quincy Cottage during the specified dates.

_____

Adult One Name | Adult One Signature | Date

_____

Adult Two Name | Adult Two Signature | Date

Fax or FedEx to:

Gina Hawkins/Cannon Beach Rentals
6501E. Greenway Parkway #103-436
Scottsdale, AZ 85254

Phone: 602-625-3013
Fax: 310 546-2183
Email: info@quincycottage.com