

Cannon Beach Ocean Front Rental Application

787 Ocean Avenue, Cannon Beach, Oregon 97110
www.CannonBeachOceanFront.com

Rental Dates Attending: _____ to _____

Applicant Information

Name(s) of all adults occupying property: _____

Primary Contact Person: _____

Home telephone number: _____ Cell phone number: _____

Business telephone number: _____

Mailing Address: _____

Employment Information of Primary Renter

Employer Name/Company: _____

Address: _____

Job Title: _____

Additional Information

Drivers License Number/State issued: _____

Please include photocopy of Drivers License with completed application.

Home Owner's Insurance Provider: _____

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

Total number of occupants (both adults and children): _____

Number of Cars that will be parked at location (Only two designated parking spots available per city ordinance): _____

This information is required by the City of Cannon Beach for all Rental Properties:

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

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***NO PARKING near trash area or back door.** If you are unsure where to park, ask caretaker for location of designated parking spots.

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 Cannon Beach Ocean Front during the specified dates.

Adult Name Adult Signature Date

Adult Name Adult Signature Date

Fax or FedEx to:

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

Phone: 516 724-3860
Fax: 310 546-2183
Email: stay@cannonbeachocceanfront.com