

Affordable Beach Cottages Property Management
Vacation Rental Application
P.O. Box 913 Waldport, OR 97394
(541) 270-0313

Please complete the following information and return by _____.

You have reserved the home, referred to as _____

for the day of (arrival – 3 p.m.) _____ to the day of (departure – 11 a.m.) _____.

Responsible Party: _____

Mailing Address: _____

Home Phone: _(_____)_____ Cell Phone: _(_____)_____

Date of Birth: _____

Drivers License #: _____ State: _____

Year & Make of Auto: _____ License Plate #: _____

Emergency Phone Contact Person: _____ Phone #: _____

Names of additional members in party, along with ages of anyone under 25 & add. auto info:

Financial Information

I will be paying for this rental by _____ check or _____ credit card. (Mark the one applicable.)

Credit card information to use (on file for security deposit, if paying by check)

Name as it appears on card: _____

_____ Visa or _____ Mastercard CC#: _____

Expiration Date: _____

By signing this application, I certify that all information is correct and that I agree to the terms of the reservation and rental agreement policies attached. I certify that I have also received a copy of the information sheet for the home I will be renting and agree to any additional requirements/restricted contained therein.

Signature of Responsible Party: _____