

NOTE: This form can be used for more than one renter.

Unit owner(s) \_\_\_\_\_

Address of unit \_\_\_\_\_

1. Name of renter(s) \_\_\_\_\_

Address of renter(s) \_\_\_\_\_

Rental Dates \_\_\_\_\_

Emergency contact name(s) and telephone number(s) \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

2. Name of renter(s) \_\_\_\_\_

Address of renter(s) \_\_\_\_\_

Rental Dates \_\_\_\_\_

Emergency contact name(s) and telephone number(s) \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

3. Name of renter(s) \_\_\_\_\_

Address of renter(s) \_\_\_\_\_

Rental Dates \_\_\_\_\_

Emergency contact name(s) and telephone number(s) \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

**GULF TO BAY COOPERATIVE, INC**  
**RENTER/GUEST INFORMATION**

MUST BE FILED IN THE OFFICE WITHIN 48 HOURS OF ARRIVAL. Note: A mail slot is available on the west side of the Office Building for your convenience if Office is closed.

Unit #: \_\_\_\_\_ Owner(s): \_\_\_\_\_

# of People In Rental/Guest Party:

Adults: \_\_\_\_\_ Children: \_\_\_\_\_

Name(s) of People in Rental/Guest Party:

1. \_\_\_\_\_ 2. \_\_\_\_\_

3. \_\_\_\_\_ 4. \_\_\_\_\_

5. \_\_\_\_\_ 6. \_\_\_\_\_

7. \_\_\_\_\_ 8. \_\_\_\_\_

Telephone # of Primary Renter/Guest: \_\_\_\_\_

Length of Stay:

From: \_\_\_\_\_ To: \_\_\_\_\_

Make and Model of Car: \_\_\_\_\_

License Plate #: \_\_\_\_\_ State: \_\_\_\_\_