

**SANTA CRUZ PORT DISTRICT  
RENTAL APPLICATION**

For the property at \_\_\_\_\_

**BUSINESS**

Name _____	Type of business _____
Address _____	Years in this business _____
City, State, Zip _____	Type of business to operate _____
Phone # _____	at harbor property _____
Email _____	

**PRINCIPALS**

1. Name _____	Position _____
Address _____	Social Security # _____
City, State, Zip _____	Driver's License # _____
Phone # _____	
2. Name _____	Position _____
Address _____	Social Security # _____
City, State, Zip _____	Driver's License # _____
Phone # _____	

**RENTAL REFERENCES**

	Address	Phone #	From → To
Current Landlord _____			
Previous Landlord _____			

**BANK REFERENCES**

Bank	Branch	Phone #	Account #
_____			
Contact: _____			

This is an application only and is not intended to serve as a binding agreement between the Santa Cruz Port District and other parties. Additionally, by signing below you are giving permission for credit information to be released to us.

Signature _____	Date _____
Signature _____	Date _____