



CARIBE C O U R T

210 Caribe Court, Statesboro, GA 30458
912-681-7873

RENTAL APPLICATION

Name _____

e-mail address _____

Address _____

City, State, Zip _____

Phone _____ Work Phone: _____

Permanent Address _____

Driver's License Number _____

State of Issue _____ S.S. Number _____

Date of Birth _____ Number of People Renting _____

Studio _____ 2 Bedroom _____ 3 Bedroom _____

Date Needed _____

Emergency Contact information (name & phone) _____

Signature of Future Tenant

Signature of Future Tenant

Signature of Future Tenant

I hereby certify that the above information is correct to the best of my knowledge. I also hereby give permission to Caribe Condos to check my past credit.

Name, address, and Phone number of the last placed you leased.

Three References Required Below

Name: _____

Address: _____

City, State, Zip: _____

Phone: _____ How long have you known this person? _____

Name: _____

Address: _____

City, State, Zip: _____

Phone: _____ How long have you known this person? _____

Name: _____

Address: _____

City, State, Zip: _____

Phone: _____ How long have you known this person? _____