

MARINERS COVE HOMEOWNERS ASSOCIATION
20700 Basin Drive
Estero, FL 33928

DISCLOSURE AND RELEASE FOR INVESTIGATION
FOR OCCUPANCY PURPOSES ONLY

*Please Print Your Full Name SSN

*Please Print Any Other Names You Have Used (if applicable) *DOB

*Street Address

*City * State *Zip Code

*Driver's License# * Exp. Date *State Issued

I hereby give consent for an investigative criminal history report for occupancy purposes. It may include information about me obtained from Law Enforcement Agencies, State Agencies, Public Records information such as criminal history information, motor vehicle records, such as are allowed by law and in accordance with the American with Disabilities Act. Your signature below indicates your understanding that this authorization shall remain with Alliant Property Management for the course of your residency.

My signature certifies that I have read and agree with the above statement.

Signature Date

*Denotes required fields