

MALANAI IKI AOA
EMERGENCY HOMEOWNER AND RESIDENT REGISTRATION FORM
(Confidential Information)
Appendix C-1

NAME _____ **UNIT #** _____ **OWNER** YES ___ or NO ___ **DATE** _____

ADDRESS _____ **HOME PHONE #** _____

NAME OF ALL OCCUPANTS WHO RESIDE WITHIN UNIT (Include age if a minor)

NAME _____ NAME _____

NAME _____ NAME _____

NAME _____ NAME _____

NOTIFY IN CASE OF AN EMERGENCY (Doctor, Relative, Friend, etc.)

NAME _____ RELATIONSHIP _____ PHONE # _____

NAME _____ RELATIONSHIP _____ PHONE # _____

	<u>AUTO MAKE & MODEL</u>	<u>YEAR</u>	<u>COLOR</u>	<u>LICENSE PLATE # & STATE</u>	<u>PARKING STALL #</u>
a)	_____	_____	_____	_____	_____
b)	_____	_____	_____	_____	_____
c)	_____	_____	_____	_____	_____

NOTE 1: If you are occupying a temporary parking stall from another occupant with their approval, please indicate the unit you are occupying the stall from and attached a letter of written agreement between you and the homeowner and/or resident.

NOTE 2: Only residents and/or guest with current license plates, registration, safety inspection sticker, automobile insurance and in operable condition, shall be permitted to park within the confines of the property area. All other vehicles will be towed at vehicle owner's expense, please refer to your House Rule regarding Automobiles and Parking.

HOMEOWNER AND RENTAL AGENCY INFORMATION

NAME OF HOMEOWNER AND/OR HOMEOWNER'S _____

ADDRESS _____
(Complete address number, street name, city, state and zip code)

HOME PHONE # _____ WORK PHONE # _____

NAME OF RENTAL AGENCY & MANAGING AGENT _____

ADDRESS _____
(Complete address number, street name, city, state and zip code)

OFFICE PHONE # _____ CELLULAR OR PAGER PHONE # _____

I have received a copy of the House Rules and agree to live within its parameters

OWNER/RENTAL AGENT NAME (PRINT) SIGNATURE DATE OF RECEIPT

RESIDENT MANAGER (PRINT) SIGNATURE DATE