

RENTAL APPLICATION

THE PROPERTY MANAGERS, LTD.
 1311 Kapiolani Blvd., Suite 308
 Honolulu, HI 96814

Phone: 596-2511
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NOTICE TO APPLICANT: YOU MUST SIGN THIS APPLICATION.			DATE:			
FOR RENTAL LOCATED AT:			HOME PHONE	CELL PHONE/PAGER NO.		
PROPOSED OCCUPANTS	APPLICANT NAME		DAY PHONE	SOCIAL SECURITY NUMBER		HOW LONG IN HAWAII? YRS. MOS.
	SPOUSE/CO-APPLICANT NAME		DAY PHONE	SOCIAL SECURITY NUMBER		HOW LONG IN HAWAII? YRS. MOS.
	OTHER OCCUPANT NAME		DAY PHONE	SOCIAL SECURITY NUMBER		HOW LONG IN HAWAII? YRS. MOS.
	OTHER OCCUPANT NAME		DAY PHONE	SOCIAL SECURITY NUMBER		HOW LONG IN HAWAII? YRS. MOS.
HOUSING DATA	PRESENT ADDRESS		FROM:	LANDLORD'S NAME	LANDLORD'S PHONE NO.	RENT PAID \$
	CITY	STATE	ZIP	WHY ARE YOU MOVING?		
	PREVIOUS ADDRESS		FROM:	TO:	RENT PAID \$	
	CITY	STATE	ZIP	LANDLORD'S NAME	LANDLORD'S PHONE NO.	
EMPLOYMENT DATA	EMPLOYER		ADDRESS		HOW LONG AT PRESENT JOB?	SALARY \$ PER MO.
	POSITION HELD		SUPERVISOR			PHONE NO.
	PREVIOUS EMPLOYER		DATE EMPLOYED	POSITION HELD	SALARY \$ PER MO.	PHONE NO.
	SPOUSE/CO-APPLICANT'S EMPLOYER		SUPERVISOR			PHONE NO.
	POSITION HELD		SALARY \$ PER MO.	OTHER INCOME \$	SOURCE	
BANK DATA	BANK NAME		BRANCH		SAVINGS ACCOUNT NUMBER	CHECKING ACCOUNT NUMBER
	BANK NAME		BRANCH		SAVINGS ACCOUNT NUMBER	CHECKING ACCOUNT NUMBER
CREDIT & LOAN DATA	FIRM NAME		BRANCH	ACCOUNT NUMBER	AMOUNT	MO. PAYMENT \$
	FIRM NAME		BRANCH	ACCOUNT NUMBER	AMOUNT	MO. PAYMENT \$
	AUTOMOBILE (YEAR)	MAKE	MODEL	LICENSE NUMBER	MO. PAYMENT \$	LOAN CO. PHONE NO.
PERSONAL REFERENCES	NAME OF NEAREST LIVING RELATIVE		RELATIONSHIP	ADDRESS		PHONE NO.
	PERSONAL REFERENCE (HAWAII RESIDENT) 1.		PHONE NO.	PERSONAL REFERENCE (HAWAII RESIDENT) 2.		PHONE NO.
RENTAL INFORMATION	IN CASE OF EMERGENCY PLEASE NOTIFY:		ADDRESS		RELATIONSHIP	PHONE NO.
	RENTAL TERM FROM: TO:		MONTHLY RENT		SECURITY DEPOSIT	
RECEIPT	RECEIPT IS HEREBY ACKNOWLEDGED FOR THE FOLLOWING:		SECURITY DEPOSIT \$	RENT \$	OTHER \$	

I HAVE READ THE ABOVE FORM AND I UNDERSTAND THAT IF I CAUSE A FINANCIAL LOSS TO MY LANDLORD, THAT MY NAME MAY BE REPORTED TO CREDIT AGENCIES. I HEREBY AUTHORIZE CONSUMER REPORTING AGENCIES TO PROVIDE YOU WITH CONSUMER REPORTS RELATING TO ME. I HEREBY GIVE MY PERMISSION FOR YOU TO VERIFY THE ABOVE INFORMATION AND I UNDERSTAND THAT SHOULD YOU HAVE TO CALL THE MAINLAND OR THE OTHER ISLANDS FOR SUCH VERIFICATION THAT I WILL BE CHARGED THE COST OF THE CALL.

PROPERTY MANAGER'S SIGNATURE _____ DATE _____

APPLICANT'S SIGNATURE _____ DATE _____

APPLICANT'S SIGNATURE _____ DATE _____