



4247 Rice St., Lihue, Kauai, HI 96766—Phone: 808-212-8900

RENTAL APPLICATION

Date: _____

Property location: _____ Preferred Move in date: _____

Name 1: _____ Main Phone(s): _____

Date of Birth: _____ E-mail: _____

Work Phone: _____ Your Job: _____

Place of Work _____ How Long? _____

Name : _____ Main Phone(s): _____

Date of Birth: _____ E-mail: _____

Work Phone: _____ Your Job: _____

Place of Work _____ How Long? _____

Names, ages of Other Occupants—phone nos. & work place if adults

Present Mailing Address: _____

Present Street Address: _____

Present Landlord / Manager's Name & Address & Phone:

Additional References: additional Landlord or other Rental References *with Phone numbers:*

Do you pay your rent on time? (circle) A. Always B. Usually C. Mostly D. Not always

Explain as necessary: _____

Do you have pets? Indoor, outdoor? Describe: _____

Have you had past problems in renting? Explain briefly (add page if needed):

Please provide a copy of a **Photo I.D.and Proof of Income** for all adult prospective tenants.

Wai'Oli AGENT (Printed Name/signature): _____

AGENT PHONE: _____ **AGENT E-MAIL:** _____

I (we) declare that the information provided here is correct, and give permission for any agencies or individuals to release credit or other information to the Landlord/Agent for the sole purposes of entering into a rental agreement.

I (we) further authorize the Landlord/Agent to verify the above information by checking references, contacting present or former landlords, and gathering such other information as Landlord may require in determining qualifications for tenancy. All information is considered private and confidential to be used for purposes of this application and tenancy only.

TENANT SIGNATURE: _____ DATE: _____

TENANT SIGNATURE: _____ DATE: _____