

Dear Ho'olei Owner/Resident: In order to serve you better and help us provide complete management service, please complete this information sheet and return to the Residence Manager as soon as possible. Thank You. manager@hooleiaoa.com
Fax: 808-856-2049.

Ho'olei AOA RESIDENT INFORMATION SHEET

Date: _____ Unit #: _____

Owner: _____ Work phone: _____

Owner: _____ Work phone: _____

Address: _____ Fax number: _____

Home phone: _____ E-mail: _____

Renters: _____ Work phone: _____

Home phone: _____

On-Island Rental/Sales Agent: _____

Work phone: _____ 24/hour cell phone: _____

Address: _____ Fax number: _____

Home phone: _____ E-mail: _____

Emergency Contact(s): _____

Relationship: _____ Hm Ph: _____ Wrk Ph: _____

Vehicles: _____
(yr/make/model/color) (license number)

(yr/make/model/color) (license number)

(yr/make/model/color) (license number)

(yr/make/model/color) (license number)

Security System Code: _____