HAWAII RESERVES, INC. RESIDENTIAL RENTAL APPLICATION

Hawaii Reserves, Inc., does not discriminate against applicants based on race, color, religion, national origin, ancestry, sex, familial or marital status, disability, age, sexual orientation, or HIV status.

This application will be kept on file for three (3) months, and it is the applicant's responsibility to contact HRI should he/she wish to be considered for rental housing beyond that period.

All of our units are rented on a month-to-month basis, consequently, we may not know if a unit becomes available until 30 days prior. When a unit matching your number of bedrooms and rent range is identified, we will call applicants in the order they were received.

Please provide ALL the information requested, sign as indicated, and please do not provide deposits, rents or any other payments with this Application.

Names of all Proposed Occupants

Proposed Occupants:	Name:		Contact Phone No.:	Relationship to #1
1)				Self
2)				Sen
3)				
4)				
	Current H	ome Ownership Stat	us & Rental Preferences o	f HRI Units
Do you curren	tly own a home: [Yes No If so	o, what is the address?	
'Comfortable	' Rent Range / Mo	nth: \$	No. of Bedrooms Desired:	☐ Studio ☐ 1 ☐2 ☐ 3 ☐4+
	<u>Curr</u>	ent & Previous Rent	al and Home Ownership H	<u>listory</u>
		(Please ans	swer ALL questions)	
Current Addı	ess:			From:
			To:	
Landlord (or B	Bank if own home)		Monthly Payment: \$ Landlord's Phone:	
Reason for Lea				Landlord's Phone:
iccason for Lea	aving.			
Previous Add	ress:	From:		
				To:
Landlord Nam	e and Address:	Monthly Payment: \$		
				Landlord's Phone:
		Vehicle & Emerge (Please provide	ncy Contact Information e the information below)	
Automobiles:	Make, Mod	el and Year:	License No.:	
1)				
2)				
Emorgonov C	ontoot.			
<mark>Emergency C</mark> Name:	ontact:	Address:		Phone:
vaiiic.		Audicss.		i none.

Please complete the reverse side of this Application

<u>Current & Previous Employment History</u>
(Please list your current & past Employers for the last three (3) years)

Proposed Occupant #1	Company:		Your Title:		
Salary \$	Address:		How long at this company?		
per:					
	Supervisor's Name:		Supervisor's Phone:		
Proposed	Company:		Your Title:		
Occupant #1					
Salary \$ per:	Address:		How long at this company?		
	Supervisor:		Supervisor's Phone:		
Proposed	Company:		Your Title:		
Occupant #2 Salary \$	Address:	How long at this company?			
per:	Supervisor:		Supervisor's Phone:		
Proposed	Company:		Your Title:		
Occupant #2			1 0 0 1 1 1 1 1 1 1		
Salary \$ per:	Address:		How long at this company?		
pc1.	Supervisor:		Supervisor's Phone:		
sheets, are true, co and references of agency, as well a signing below, th for rejection of	omplete and correct; author n this Application; and furth as criminal and all available ne Applicant(s) agree(s) that of this Application, and the t	zes the Landlord to contact er authorizes the Landlord background checks on any o false or incomplete informa ermination of any subsequen	ts on this application, including any attached listed individuals to verify all of the information to obtain a credit report from a credit reporting or all individuals listed on this Application. By tion on this Application may constitute grounds at lease. The Applicant(s) understand(s) and with a current copy of his/her driver's license or		
Signatures: (All	adults listed above must si	gn) Date:			
Print Legal Name	e of Proposed Occupant No	. 1 Signature	Signature		
Print Legal Name	e of Proposed Occupant No	. 2 Signature For Owner's Use Only (Do Not Write Below This Line)		
Data Application Ica	and:	Data Cannite	Danocit Pacaivad		
Date Application Issu Date Application Rec			Deposit Received: Agreement Made:		
Date Credit Checks N		Date Orientat			
Date References Che	cked:	Date Keys Iss			
Date Response Issued	d:	Date of Occur	nancy.		

Please download this form, fill in your information, and email completed form to rentals@hawaiireserves.com