

# KAI NANI AT MAKAKILO OWNER/RESIDENT VEHICLE REGISTRATION FORM

Unit Number \_\_\_\_\_ Bldg. Number \_\_\_\_\_

Owner Name \_\_\_\_\_

Mailing Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_

Telephone Number (Business) \_\_\_\_\_ (Home) \_\_\_\_\_ (Cellular) \_\_\_\_\_

## AUTOMOBILE

Year \_\_\_\_\_ Make \_\_\_\_\_ Model \_\_\_\_\_ License # \_\_\_\_\_

Year \_\_\_\_\_ Make \_\_\_\_\_ Model \_\_\_\_\_ License # \_\_\_\_\_

Year \_\_\_\_\_ Make \_\_\_\_\_ Model \_\_\_\_\_ License # \_\_\_\_\_

## IN CASE OF EMERGENCY CONTACT:

Name \_\_\_\_\_

Telephone Number(s) \_\_\_\_\_ OR \_\_\_\_\_

Rental Agent Name/Company \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_

Telephone Number (Business) \_\_\_\_\_

## Tenant Information:

Name \_\_\_\_\_

Telephone Number (Business) \_\_\_\_\_ (Home) \_\_\_\_\_ (Cellular) \_\_\_\_\_

Name \_\_\_\_\_

Telephone Number (Business) \_\_\_\_\_ (Home) \_\_\_\_\_ (Cellular) \_\_\_\_\_

Signature \_\_\_\_\_ Date \_\_\_\_\_

This information is CONFIDENTIAL and will be treated accordingly.

Please mail this form to:  
Hawaiiana Management Company, Inc.  
Attn: Beverly FeBenito  
711 Kapiolani Boulevard, Suite 700  
Honolulu, Hawaii 96813