



Canterbury Place

UNIT OWNER DATA SHEET

PLEASE PRINT

UNIT NUMBER _____ PARKING STALL # _____ ENTERPHONE # _____ DATE _____

LEGAL OWNER INFO & ADDRESS

(CIRCLE)

MR. / MRS. / MS. (Name) _____

MR. / MRS. / MS. (Name) _____

Relationship _____

COMPANY _____

(OR OTHER NAME)

TITLE _____

ADDRESS _____

CITY _____

STATE _____ ZIP _____

UNIT PHONE # _____

HOME PHONE # _____

BUSINESS PHONE # _____

CELL PHONE # _____ FAX PHONE # _____

E-MAIL ADDRESS: _____

BILLING ADDRESS

(IF NOT THE SAME AS ABOVE)

CONTACT NAME (NOT NEEDED IF REPORTED TO HAWAIIAN PROPERTY, LTD) _____

BUSINESS NAME _____

ADDRESS _____

CITY _____

STATE _____ ZIP _____

BUSINESS PHONE # _____

FAX PHONE # _____

OTHER PHONE # _____

OTHERS AUTHORIZED TO USE UNIT (LIST ALL FAMILY MEMBERS)

USE BACK SIDE IF NEEDED

Contact in case of medical emergency (REQUIRED)

NAME _____

PHONE # _____ RELATIONSHIP _____

Do you need handicap assistance in an emergency Y N

OWNER SIGNATURE _____

DATE _____

PLEASE RETURN THIS FORM TO THE MANAGER'S OFFICE FOR PERMANENT FILE. IF ANY OF THE ABOVE INFORMATION CHANGES, PLEASE NOTIFY CANTERBURY PLACE IN WRITING OR BY FAX # (808) 941-1400 OR E-MAIL TO: OFFICE@CANTERBURYPLACE.NET

LOCAL CONTACT OR AGENT

Required by law if you rent your unit and do not live "FULL TIME" in Hawaii

NAME _____

COMPANY _____

ADDRESS _____

CITY _____

STATE _____ ZIP _____

CELL (or HOME) PHONE # _____

BUSINESS PHONE # _____

FAX PHONE # _____

E-MAIL ADDRESS _____

ABOVE AGENT / CONTACT RESPONSIBILITIES

AUTHORIZED TO RECEIVE AND ISSUE KEYS Y ___ N ___

WE CAN OPEN APARTMENT FOR AGENT Y ___ N ___

AGENT CAN SIGN PROXY (Require Power of Attorney) Y ___ N ___

THE FOLLOWING HAVE AUTHORITY TO ENTER APT.

CANTERBURY PERSONNEL FOR EMERGENCIES Y ___ N ___

FUMIGATION Y ___ N ___

AIR CONDITIONING SERVICE Y ___ N ___

OTHERS _____ :Y ___ N ___

(CLEANER, ETC.)

USE BACK SIDE IF NEEDED

AUTOMOBILE

MAKE #1 _____ / #2 _____

MODEL/COLOR #1 _____ / #2 _____

YEAR #1 _____ / #2 _____

LICENSE #1 _____ / #2 _____

STICKER #1 _____ (Office Use) / #2 _____ (Office Use)

IS THIS A RENTAL UNIT? Y N ___

PETS ALLOWED? Y ___ N ___

DESCRIPTION OF PET _____

NAME ON BUILDING DIRECTORY Y ___ N ___

I ACKNOWLEDGE THAT I HAVE RECEIVED A COPY OF THE HOUSE RULES Y ___ N ___