

KEONEKAI VILLAGES
OWNER/TENANT INFORMATION
UNIT # _____

Date: _____

NAME OF CURRENT OWNER: _____

CONTACT PHONE # _____

RENTAL AGENT (IF UNIT IS RENTED) _____

CONTACT PHONE # _____

NAME OF UNIT OCCUPANT: _____

ADDITIONAL OCCUPANTS:

1. _____

2. _____

3. _____

4. _____

PHONE: (RES.) _____

(BUS.) _____

EMERGENCY #: _____

FAX: _____

EMAIL: _____

CAR MAKE: _____

PLATE #: _____

RECEIVED HOUSE RULES? YES _____ NO _____

PARKING STALL # _____

Owner/Tenant's Signature: _____

Resident Manager's Office
Phone (808)874-3794
160 Keonekai Road #4-105
Kihei, Maui, HI. 96753