

# Hawaiki Tower Resident Data Sheet

## RESIDENT INFORMATION

UNIT: \_\_\_\_\_ DATE: \_\_\_\_\_

OWNER:  TENANT:  LEASE START DATE: \_\_\_\_\_ LEASE END DATE: \_\_\_\_\_

ASSISTANCE REQUIRED? YES NO

FIRST NAME: \_\_\_\_\_ HOME PHONE: \_\_\_\_\_

LAST NAME: \_\_\_\_\_ CELL PHONE: \_\_\_\_\_

EMAIL: \_\_\_\_\_ WORK PHONE: \_\_\_\_\_

FIRST NAME: \_\_\_\_\_ HOME PHONE: \_\_\_\_\_

LAST NAME: \_\_\_\_\_ CELL PHONE: \_\_\_\_\_

EMAIL: \_\_\_\_\_ WORK PHONE: \_\_\_\_\_

ADDITIONAL OCCUPANT: \_\_\_\_\_ ADDITIONAL OCCUPANT: \_\_\_\_\_

ADDITIONAL OCCUPANT: \_\_\_\_\_ ADDITIONAL OCCUPANT: \_\_\_\_\_

## ADDITIONAL INFORMATION

EMERGENCY CONTACT: \_\_\_\_\_ PHONE: \_\_\_\_\_

EMERGENCY CONTACT: \_\_\_\_\_ PHONE: \_\_\_\_\_

EMERGENCY CONTACT: \_\_\_\_\_ PHONE: \_\_\_\_\_

|  | Make | Model | Color | License | Stall # |
|--|------|-------|-------|---------|---------|
|--|------|-------|-------|---------|---------|

|          |       |       |       |       |       |
|----------|-------|-------|-------|-------|-------|
| VEHICLE: | _____ | _____ | _____ | _____ | _____ |
|----------|-------|-------|-------|-------|-------|

|          |       |       |       |       |       |
|----------|-------|-------|-------|-------|-------|
| VEHICLE: | _____ | _____ | _____ | _____ | _____ |
|----------|-------|-------|-------|-------|-------|

|          |       |       |       |       |       |
|----------|-------|-------|-------|-------|-------|
| VEHICLE: | _____ | _____ | _____ | _____ | _____ |
|----------|-------|-------|-------|-------|-------|

|  | Type | Pet's Name | Breed | Color | Weight |
|--|------|------------|-------|-------|--------|
|--|------|------------|-------|-------|--------|

|      |       |       |       |       |       |
|------|-------|-------|-------|-------|-------|
| PET: | _____ | _____ | _____ | _____ | _____ |
|------|-------|-------|-------|-------|-------|

# Hawaiki Tower Resident Data Sheet

## OFF-SITE OWNER INFORMATION

|           |       |              |       |
|-----------|-------|--------------|-------|
| OWNER(S): | _____ | EMAIL(S):    | _____ |
|           | _____ |              | _____ |
|           | _____ |              | _____ |
|           | _____ |              | _____ |
| ADDRESS:  | _____ | HOME PHONE:  | _____ |
|           | _____ | CELL PHONE:  | _____ |
|           | _____ | WORK PHONE:  | _____ |
|           | _____ | OTHER PHONE: | _____ |

## AGENT / LOCAL CONTACT INFORMATION

|             |       |                 |       |
|-------------|-------|-----------------|-------|
| FIRST NAME: | _____ | EMAIL:          | _____ |
| LAST NAME:  | _____ | BUSINESS PHONE: | _____ |
| COMPANY:    | _____ | CELL PHONE:     | _____ |
| ADDRESS:    | _____ | FAX NUMBER:     | _____ |
|             | _____ | OTHER PHONE:    | _____ |

## OTHER INFORMATION

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