

# RENTAL APPLICATION

(UNRELATED PARTIES MUST COMPLETE SEPARATE APPLICATIONS)

SUBMIT APPLICATION

LOCATION OF RENTAL				LANDLORD / AGENT INFORMATION				
				Realty Isle (jasonlum@realtyisle.com) / Phone 808-946-4753 Fax 808-748-0707				
APPLICANT		PHONE NO.		EMAIL		SOCIAL SECURITY NO. (LAST 4 DIGITS)		
HOW LONG IN HAWAII?	OTHER OCCUPANT, NAME			PHONE / EMAIL			SOCIAL SECURITY NO. (LAST 4 DIGITS)	
<b>ALL OTHER OCCUPANTS</b>	OTHER OCCUPANT, NAME			PHONE / EMAIL			SOCIAL SECURITY NO. (LAST 4 DIGITS)	
	OTHER OCCUPANT, NAME			PHONE / EMAIL			SOCIAL SECURITY NO. (LAST 4 DIGITS)	
<b>HOUSING INFO</b>	PRESENT ADDRESS			FROM	LANDLORD	TELEPHONE	RENT PAID	
	CITY / ZIP				REASON FOR MOVING			
	PREVIOUS ADDRESS			FROM	TO	LANDLORD	RENT PAID	
			CITY / ZIP					
<b>EMPLOYMENT INFO</b>	EMPLOYER			ADDRESS		SUPERVISOR	TELEPHONE	
	POSITION HELD		HOW LONG AT PRESENT JOB?	SALARY		HOUSING ALLOWANCE AMOUNT	ROTATION DATE	
	PREVIOUS EMPLOYER		DATE EMPLOYED	POSITION HELD		SALARY	TELEPHONE	
	SPOUSE'S EMPLOYER		SUPERVISOR	POSITION HELD		SALARY	TELEPHONE	
OTHER INCOME		SOURCE	DSS ASSISTANCE		AMOUNT	WORKER'S NAME	UNIT	
<b>OTHER INFO</b>								
<b>CREDIT AND LOAN INFO</b>	AUTOMOBILE YEAR	MAKE	MODEL	LICENSE NO.	MONTHLY PAYMENT	LOAN COMPANY	PHONE	
	FIRM NAME		BRANCH	ACCOUNT NO. (LAST 4 DIGITS)	AMOUNT	MONTHLY PAYMENT	LOAN TYPE	
FIRM NAME		BRANCH	ACCOUNT NO. (LAST 4 DIGITS)	AMOUNT	MONTHLY PAYMENT	LOAN TYPE		
<b>PERSONAL REFERENCES</b>	NAME OF NEAREST LIVING RELATIVE		RELATIONSHIP		ADDRESS		TELEPHONE	
	PERSONAL REFERENCE (HAWAII RESIDENT)		TELEPHONE		PERSONAL REFERENCE (HAWAII RESIDENT)		TELEPHONE	
EMERGENCY CONTACT:		ADDRESS		RELATIONSHIP		TELEPHONE		
<p>I HAVE READ THE ABOVE FORM AND UNDERSTAND THAT IF I CAUSE A FINANCIAL LOSS TO MY LANDLORD, THAT MY NAME MAY BE PLACED IN THE FILES OF CONSUMER REPORTING SERVICES AND SUCH INFORMATION WILL BE FURNISHED TO SUBSCRIBERS WHO HAVE A LEGAL NEED TO MAKE AN INQUIRY, I ALSO UNDERSTAND THAT CAUSING A FINANCIAL LOSS MAY LIMIT MY ABILITY TO OBTAIN CREDIT OR LEASE OTHER DWELLING UNITS.</p> <p>I HEREBY AUTHORIZE CONSUMER REPORTING AGENCIES TO PROVIDE YOU WITH CONSUMER REPORTS RELATING TO ME. I HEREBY GIVE MY PERMISSION FOR YOU AND CONSUMER REPORTING AGENCIES THE ABILITY TO VERIFY THE ABOVE INFORMATION AND I UNDERSTAND THAT SHOULD YOU HAVE TO CALL LONG DISTANCE FOR SUCH SERVICES THAT I MAY BE CHARGED THE COST OF THE CALL..</p>								
SIGNATURE OF APPLICANT			DATE		SIGNATURE OF APPLICANT			DATE