

QUAM PROPERTIES HAWAII, INC.  
5095 NAPILIHU STREET #201  
LAHAINA, HI 96761  
PH 808 665-1315  
FAX 808 665-1319



**RENTAL APPLICATION**

**Equal Housing Opportunity**

**\*\*You must submit \$25 ( payable in cash only ) per adult for the cost of processing your credit check\*\***

The undersigned hereby makes an application to rent the following property:

Anticipated move date of \_\_\_\_\_ at a monthly rent of \$\_\_\_\_\_ and security deposit of \$\_\_\_\_\_.

**PLEASE TELL US ABOUT YOURSELF**

Full Name \_\_\_\_\_ Home Phone ( ) \_\_\_\_\_  
Date of Birth \_\_\_\_\_ Social Security # \_\_\_\_\_  
Email Address: \_\_\_\_\_ (optional) Other Phone ( ) \_\_\_\_\_  
Co-Applicant Name \_\_\_\_\_ Names of Dependents \_\_\_\_\_  
Co-Applicant Date of Birth \_\_\_\_\_ Social Security # \_\_\_\_\_  
Dependents Date of Birth \_\_\_\_\_  
List All Pets \_\_\_\_\_

**PLEASE GIVE RESIDENTIAL HISTORY (LAST 3 YEARS)**

Current Address \_\_\_\_\_ Apt# \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_  
Month/Year Moved In \_\_\_\_\_ Reasons for Leaving \_\_\_\_\_ Rent \$ \_\_\_\_\_  
Owner/Agent \_\_\_\_\_ Phone ( ) \_\_\_\_\_  
Previous Address (last 3 years) \_\_\_\_\_ Rent \$ \_\_\_\_\_  
Owner/Agent \_\_\_\_\_ Phone ( ) \_\_\_\_\_

**PLEASE DESCRIBE YOUR CREDIT HISTORY**

Have you declared bankruptcy in the past seven (7) years? Yes \_\_\_\_\_ No \_\_\_\_\_  
Have you ever been evicted from a rental residence? Yes \_\_\_\_\_ No \_\_\_\_\_  
Have you had two or more late rental payments in the past year? Yes \_\_\_\_\_ No \_\_\_\_\_  
Have you ever willfully or intentionally refused to pay rent when due? Yes \_\_\_\_\_ No \_\_\_\_\_

**PLEASE PROVIDE YOUR EMPLOYMENT INFORMATION**

Your Status: \_\_\_\_\_ Full Time \_\_\_\_\_ Part Time \_\_\_\_\_ Student \_\_\_\_\_ Unemployed \_\_\_\_\_  
Employer \_\_\_\_\_  
Dates employed \_\_\_\_\_ Employed as \_\_\_\_\_  
Supervisor Name \_\_\_\_\_ Phone ( ) \_\_\_\_\_  
Salary \$ \_\_\_\_\_ per \_\_\_\_\_. (If employed by above less than 12 months, give name & phone of previous employer or school: \_\_\_\_\_.)

If you have other sources of income that you would like us to consider, please list income, source, and person (banker, employer, etc.) who we may contact for confirmation. You do not have to reveal alimony, child support, or spouse's annual income unless you want us to consider it in this application.

Amount \$ \_\_\_\_\_ Source \_\_\_\_\_  
Contact Name \_\_\_\_\_ Contact Phone \_\_\_\_\_

**PLEASE LIST YOUR REFERENCES**

**Banking Accounts:**

Name \_\_\_\_\_ Type of Account \_\_\_\_\_ Account Number \_\_\_\_\_  
Name \_\_\_\_\_ Type of Account \_\_\_\_\_ Account Number \_\_\_\_\_

**Personal Reference or Emergency Contact:**

Name \_\_\_\_\_ Address \_\_\_\_\_  
Phone \_\_\_\_\_ Relationship \_\_\_\_\_

**Driver's License:**

Your Driver's License Number \_\_\_\_\_ State \_\_\_\_\_  
Co-Applicants License Number \_\_\_\_\_ State \_\_\_\_\_

**Vehicle Information:**

Make / Model \_\_\_\_\_ Year \_\_\_\_\_ License \_\_\_\_\_  
Make / Model \_\_\_\_\_ Year \_\_\_\_\_ License \_\_\_\_\_

**ADDITIONAL INFORMATION:**

Please give any additional information that might help owner/management evaluate this application?

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Where may we reach you to discuss this application?

Day Phone # ( ) \_\_\_\_\_ Night Phone # ( ) \_\_\_\_\_

E-mail Address: \_\_\_\_\_

I hereby apply to lease the above described premises for the term and upon the set conditions above set forth and agree that the rental is to be payable the first day of each month in advance.

The above information, to the best of my knowledge, is true and correct.

Please sign: X \_\_\_\_\_ X \_\_\_\_\_  
Signature of Applicant Signature of Co-Applicant Date