

# WEST COAST ISLAND PROPERTIES, INC.

Please fill out application completely. Any missed information may lengthen the processing time of the application. Be sure to contact us if you can provide additional information or decide to withdraw the application. Our email is: [Mike@westcoastislandproperties.com](mailto:Mike@westcoastislandproperties.com) and our fax in California is 562-493-5663.

Rental Property Location: \_\_\_\_\_

When would you like to move in?: \_\_\_\_\_ Monthly Rent: \_\_\_\_\_

## Proposed Occupants:

Applicant Name: \_\_\_\_\_ SS# \_\_\_\_\_

Phone Numbers: \_\_\_\_\_ How long in Hawaii? \_\_\_\_\_

Other Occupant: \_\_\_\_\_ SS# \_\_\_\_\_

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Pets? \_\_\_\_\_ (Describe) \_\_\_\_\_ Size: \_\_\_\_\_ lbs. Number: \_\_\_\_\_

## Housing Information:

Present Address: \_\_\_\_\_

Landlord's Name: \_\_\_\_\_ Phone #: \_\_\_\_\_

How long at this address? \_\_\_\_\_ Reason for moving: \_\_\_\_\_

Amount of rent paid: \_\_\_\_\_

Previous Address: \_\_\_\_\_

Landlord's Name: \_\_\_\_\_ Phone #: \_\_\_\_\_

Amount of rent paid: \_\_\_\_\_ How long at this address? \_\_\_\_\_



**QUALITY SERVICE \* INTEGRITY \* PROFESSIONALISM**

**7 WATERFRONT PLAZA, 500 ALA MOANA #400, HONOLULU, HAWAII 96813  
TELEPHONE: (808) 783-5974 \* FAX: (808) 523-9497**

# WEST COAST ISLAND PROPERTIES, INC.

## **Employment Information:**

Employer: \_\_\_\_\_ Phone #: \_\_\_\_\_

Address: \_\_\_\_\_ Supervisor: \_\_\_\_\_

Position Held: \_\_\_\_\_ How long employed? \_\_\_\_\_

Salary: \_\_\_\_\_

Previous Employer: \_\_\_\_\_ Phone #: \_\_\_\_\_

Address: \_\_\_\_\_ Supervisor: \_\_\_\_\_

Position Held: \_\_\_\_\_ How long employed? \_\_\_\_\_

Salary: \_\_\_\_\_

Spouse's Employer: \_\_\_\_\_ Phone #: \_\_\_\_\_

Address: \_\_\_\_\_ Supervisor: \_\_\_\_\_

Position Held: \_\_\_\_\_ How long employed? \_\_\_\_\_

Salary: \_\_\_\_\_

Other Income: \_\_\_\_\_ Source: \_\_\_\_\_

## **Military Personnel Only:**

Branch of Service: \_\_\_\_\_ Duty Station: \_\_\_\_\_ Rank: \_\_\_\_\_

Length of Service: \_\_\_\_\_ Housing Allowance: \_\_\_\_\_ Date of Rotation: \_\_\_\_\_

Supervisor: \_\_\_\_\_ Telephone: \_\_\_\_\_

Commanding Officer: \_\_\_\_\_ Telephone: \_\_\_\_\_

## **Bank Data:**

Bank Name: \_\_\_\_\_ Branch \_\_\_\_\_ Checking/Savings

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# WEST COAST ISLAND PROPERTIES, INC.

## **Vehicles:**

Auto Make:\_\_\_\_\_ Model:\_\_\_\_\_ Year:\_\_\_\_\_

Auto Make:\_\_\_\_\_ Model:\_\_\_\_\_ Year:\_\_\_\_\_

Auto Make:\_\_\_\_\_ Model:\_\_\_\_\_ Year:\_\_\_\_\_

## **Personal References:**

Name:\_\_\_\_\_ Telephone Number:\_\_\_\_\_

Name:\_\_\_\_\_ Telephone Number:\_\_\_\_\_

Name of Nearest Living Relative:\_\_\_\_\_

Address:\_\_\_\_\_ Telephone Number:\_\_\_\_\_

In case of emergency contact: Telephone Number:\_\_\_\_\_

*I hereby authorize consumer reporting agencies to provide you with consumer reports relating to me. I hereby give my permission for you to verify the above information. I hereby certify that the above information is true and accurate to the best of my knowledge.*

\_\_\_\_\_  
Name- Print & Sign

\_\_\_\_\_  
Date

\_\_\_\_\_  
Name- Print & Sign

\_\_\_\_\_  
Date

\_\_\_\_\_  
Name- Print & Sign

\_\_\_\_\_  
Date



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