



RENTAL INSTRUCTIONS AND APPLICATION
Hawaii Association of REALTORS® Standard Form
Revised \_\_\_ For Release \_\_\_



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Attached is the rental application. The following is an explanation of the application process:

Application:

- Each adult applicant must complete a rental application.
Please list the names of all occupants (including minors).
There is a non-refundable application fee of \$\_\_\_ per adult applicant.
(Application fee is payable to \_\_\_. by check, cash or money order, \_\_\_)

\*\* Any information missing from the application (i.e. telephone numbers, previous landlord's name, signatures, etc) or if application fee is not received; the application will be considered INCOMPLETE and will NOT be processed.

Submitting Application:

- Hand delivered or mailed to our office at:
Faxed to
Emailed directly to the managing agent.

\*\* When faxing or emailing application, please make arrangements to get monies for the application fee either dropped off, mailed to the office, or

Processing:

- Once a completed application is submitted, please allow time for processing – usually at least 48 hours. Processing time will vary depending on the number of applications received.
Co-signers for an applicant must provide their own completed application, fee and verification of income.
Applications are evaluated based on credit and income qualifications.
This application is for qualification purposes only and does not in any way guarantee the applicant that he/she will be offered this property. Applicant understands that we can and will accept more than one application on this rental property and in our sole discretion will select the best-qualified tenant.

\*\* Once approved, the applicant must respond to the offer and set a time to sign a lease and pay the deposit within 24 hours or offer may be rescinded.

At the time of signing the lease, you will need your picture ID. Payment for your security deposit is payable by cashier's check, money order, personal check, or -we do not accept credit cards/debit cards.



**RENTAL APPLICATION**

An application fee of \$ \_\_\_\_\_ per adult applicant must be submitted. You may pay by cash, money order, cashier's check or personal check (payable to \_\_\_\_\_).  
Amount rec'd: \$ \_\_\_\_\_ Date: \_\_\_\_\_ Check no. \_\_\_\_\_ Initials \_\_\_\_\_

Rental Property Location: \_\_\_\_\_ Prop Code: \_\_\_\_\_

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

**Proposed Occupants**

**Full Name** (First MI Last): \_\_\_\_\_ SS# \_\_\_\_\_

State Driver's License# \_\_\_\_\_ State ID# \_\_\_\_\_

Phone Numbers: \_\_\_\_\_, \_\_\_\_\_

Email address(s): \_\_\_\_\_

**List all** Other Occupant: \_\_\_\_\_

Other Occupant: \_\_\_\_\_

Other Occupant: \_\_\_\_\_

Will any animals be living with you? Please explain: \_\_\_\_\_ weight/age \_\_\_\_\_

**Housing Information:**

**Present Address:** \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

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

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

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

**Previous Address:** \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

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

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

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

**Personal Information:**

1) How long have you lived in Hawaii? \_\_\_\_\_

2) Does anyone in your party smoke? Yes [ ] No [ ]

Our properties are all non-smoking.

3) Do you have Renter's Insurance? Yes [ ] No [ ]

The property owner carries insurance on the **dwelling only**. We recommend/require (circle one) that you obtain insurance to cover your furnishings and personal belongings.

4) Have you declared bankruptcy or had a foreclosure in the past seven (7) years? Yes [ ] No [ ]

5) Have you had any late payments in the past year? Yes [ ] No [ ]

6) Have you ever been evicted? Yes [ ] No [ ]

If yes, explain \_\_\_\_\_

7) Have you ever been convicted of or pleaded guilty or "no contest" to a felony? Yes [ ] No [ ]

If yes, explain \_\_\_\_\_

8) Where did you learn about this property? \_\_\_\_\_

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

**Applicant Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_

**Employment Information:**

Status  Full Time  Part Time  Full Time Student  Part Time Student  Unemployed  
 Self Employed  Retired

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

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

Position Held: \_\_\_\_\_ How long employed? \_\_\_\_\_ Gross Monthly Income: \_\_\_\_\_

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

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

Position Held: \_\_\_\_\_ How long employed? \_\_\_\_\_ Gross Monthly Income: \_\_\_\_\_

**Other Income:** \$ \_\_\_\_\_ Source: \_\_\_\_\_

**Housing Assistance:** \_\_\_\_\_ Amount: \$ \_\_\_\_\_

**Case Worker's Name:** \_\_\_\_\_ Phone #: \_\_\_\_\_

**Military Personnel Only:**

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

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

Position: \_\_\_\_\_ Gross Monthly Income: \_\_\_\_\_

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

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

**Bank Data:**

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

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

**Auto Data:**

Auto Make: \_\_\_\_\_ Model: \_\_\_\_\_ Year: \_\_\_\_\_ Color: \_\_\_\_\_ License Plate #: \_\_\_\_\_

Auto Make: \_\_\_\_\_ Model: \_\_\_\_\_ Year: \_\_\_\_\_ Color: \_\_\_\_\_ License Plate #: \_\_\_\_\_

Auto Make: \_\_\_\_\_ Model: \_\_\_\_\_ Year: \_\_\_\_\_ Color: \_\_\_\_\_ License Plate #: \_\_\_\_\_

Auto Make: \_\_\_\_\_ Model: \_\_\_\_\_ Year: \_\_\_\_\_ Color: \_\_\_\_\_ License Plate #: \_\_\_\_\_

**Personal References (Hawaii Resident Preferred):**

Name: \_\_\_\_\_ Relationship: \_\_\_\_\_

Address: \_\_\_\_\_ Phone Number: \_\_\_\_\_

Name: \_\_\_\_\_ Relationship: \_\_\_\_\_

Address: \_\_\_\_\_ Phone Number: \_\_\_\_\_

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

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

E-Mail: \_\_\_\_\_

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

E-Mail: \_\_\_\_\_

**Applicant Name (Print):** \_\_\_\_\_ **Initial** \_\_\_\_\_ **Date:** \_\_\_\_\_

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