

## Vehicle Additions & Deletions

Office Use 

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	FIRST	LAST	HOME PHONE
Property Owner Name(s)			

Lot Address	NUMBER-STREET	CITY	STATE	ZIP
		Honolulu	HI	96821

Mail Address	HOW DO YOU WANT YOUR MAIL ADDRESSED? (MR., MRS., DR., ETC.)	CONTACT PHONE	FAX NO.

NUMBER-STREET	CITY	STATE	ZIP

**Emergency Information:**

OWNERS' 1ST NAME	COMPANY NAME	STREET ADDRESS	CITY	ZIP	PHONE	POSITION

Names of other family members living with property owner(s)	FIRST NAME	LAST NAME	RELATIONSHIP	DRIVER?
				<input type="checkbox"/> YES <input type="checkbox"/> NO
				<input type="checkbox"/> YES <input type="checkbox"/> NO
				<input type="checkbox"/> YES <input type="checkbox"/> NO

**your house (or portion thereof) is rented, please complete below:**

RENTER NAME(S)	RENTER RES PHONE	RENTER BUS PHONE

## Vehicle Changes

	YEAR	MAKE	MODEL	COLOR	LICENSE No.	OFFICE USE
Add						

*Vehicles must be driven exclusively by property owners, or by family members residing with owners in Waialae Iki 5.*

	YEAR	MAKE	MODEL	COLOR	LICENSE No.	OFFICE USE
Delete						

**Security Reminder: Did you remove your old decal before transferring your vehicle?**

The undersigned understands and agrees that the decals are restricted for use on vehicles driven exclusively by property owners or by resident family members living with property owners in Waialae Iki 5, and is not to be used by others, including but not limited to, renters, house sitters, long-term guests, and employees. The undersigned further agrees to show vehicle registration documents if deemed necessary by the Association.

Property Owner's Signature \_\_\_\_\_ Date \_\_\_\_\_

Please fill form out completely and turn it in to the Guard Station, or mail to: Waialae Iki 5, 1959 Laukahi St., Honolulu, HI 96821