

APPLICATION FOR NEW VEHICLE DECALS Vehicle Additions and Deletions

Office Use

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Property Owner Name(s)

First	Last	Home Phone

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 Number	
Number & Street	City	State	Zip

Emergency Information

Owners' 1 st 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
			<input type="checkbox"/> Yes <input type="checkbox"/> No
			<input type="checkbox"/> Yes <input type="checkbox"/> No
			<input type="checkbox"/> Yes <input type="checkbox"/> No

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

Renter Name(s)	Renter Res Phone	Renter Bus Phone

Vehicle Data

List only vehicles that are driven exclusively by owners or by family members living with owners in Waialae Iki 5.

Year	Make	Model	Color	License No.	Office Use

Please affix the decal(s) on the inside of the windshield in the lower left corner (driver's side).

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 owners in Waialae Iki 5, and are 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 Street, Honolulu, HI 96821