PACIFIC RIM PROPERTIES LTD.

"Personal, Professional Service Since 1969"

NOTICE TO APPLICANT: Please provide all information requested. Use another sheet of paper or attach additional documents as needed. **You must sign this form and pay the $20.00 application fee in order for us to begin the verification process.**

APPLICANT		UNIT APPLYING FOR	SOCIAL SECURITY NUMBER
FIRM/GUARANTOR (OPTIONAL)		TELEPHONE	E-MAIL
MOVE IN DATE	OTHER OCCUPANT NAME	OTHER OCCUPANT NAME	
HOW LONG IN HAWAII? YEARS: MONTHS:	OTHER OCCUPANT NAME	OTHER OCCUPANT NAME	
PRESENT ADDRESS	LANDLORD NAME	PHONE	RENT
CITY, STATE, ZIP	MOVE IN DATE	REASON FOR MOVING	
PREVIOUS ADDRESS	LANDLORD NAME	PHONE	RENT
CITY, STATE, ZIP	MOVE IN DATE	MOVE OUT DATE	REASON FOR MOVING
PRESENT EMPLOYER	ADDRESS	SUPERVISOR	PHONE
POSITION HELD	HOW LONG AT PRESENT JOB?	SALARY	HOUSING ALLOWANCE (IF ANY)
PREVIOUS EMPLOYER	DATE(S) EMPLOYED	POSITION HELD	SALARY / PHONE
OTHER OCCUPANT EMPLOYER	SUPERVISOR	POSITION HELD	SALARY / PHONE
OTHER INCOME SOURCE	AMOUNT	OTHER INCOME SOURCE	AMOUNT
PRIMARY BANK	ACCOUNT TYPE (CHECKING, SAVINGS, OTHER)	LOCATION (CITY, STATE)	
LOAN TYPE (MORTGAGE, STUDENT, VEHICLE, ETC)	AMOUNT	MONTHLY PAYMENT	
LOAN TYPE (MORTGAGE STUDENT, VEHICLE, ETC)	AMOUNT	MONTHLY PAYMENT	VEHICLE LICENSE #
PERSONAL REFERENCE (HAWAII RESIDENT PREFERRED)	PHONE	PERSONAL REFERENCE	PHONE
EMERGENCY CONTACT	ADDRESS	PHONE	RELATIONSHIP

I have read the above form and I understand that if I cause a financial loss to my landlord, such information will be furnished to subscribers who have a Bona Fide and Legal need to make an inquiry. I also understand that causing a financial loss may limit my ability to obtain credit or lease other dwelling units. 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.

_____/_____ _____/_____

Agent Signature Date Tenant Applicant Signature Date

-- FOR OFFICE USE ONLY --

RENTAL TERM START: END:	RENT/SECURITY DEPOSIT	LEASE SIGN DATE

Application fee of $20.00 received on (Date) _____ by (Agent) _____ as ☐Cash ☐Check/M.O.

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