

**WAIALAE PLACE RESIDENT REGISTRATION**

Apt. No: \_\_\_\_\_ Address: \_\_\_\_\_

Move-in Date: \_\_\_\_\_ Parking Stall/Locker No.: \_\_\_\_\_

First Name: \_\_\_\_\_ MI: \_\_\_\_\_ Last Name: \_\_\_\_\_

**(Required)** Email Address: \_\_\_\_\_

Telephone: \_\_\_\_\_ Business Telephone: \_\_\_\_\_

Check One:      Owner      Non-Owner

First Name: \_\_\_\_\_ MI: \_\_\_\_\_ Last Name: \_\_\_\_\_

**(Required)** Email Address: \_\_\_\_\_

Telephone: \_\_\_\_\_ Business Telephone: \_\_\_\_\_

Check One:      Owner      Non-Owner

Additional Person(s) Occupying Unit

Relationship

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Emergency Contact: \_\_\_\_\_

Email Address: \_\_\_\_\_ Phone: \_\_\_\_\_

Emergency Contact: \_\_\_\_\_

Email Address: \_\_\_\_\_ Phone: \_\_\_\_\_

**Vehicles**

| Year | Make | Model | Color | License Number |
|------|------|-------|-------|----------------|
|------|------|-------|-------|----------------|

|       |       |       |       |       |
|-------|-------|-------|-------|-------|
| _____ | _____ | _____ | _____ | _____ |
| _____ | _____ | _____ | _____ | _____ |

*This information is confidential and will be treated accordingly.*

I have received a copy of the Waialae Place Association Rules from the apartment owner, or owner's agent and shall occupy the apartment for at least, but no less than 90 days:

\_\_\_\_\_  
Resident Signature

\_\_\_\_\_  
Date Signed

Owner's Name (if non-resident): \_\_\_\_\_

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

Telephone Numbers: Home:\_\_\_\_\_ Business:\_\_\_\_\_

Email Address:\_\_\_\_\_

Rental Agent Name: \_\_\_\_\_

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

Telephone Numbers: Home:\_\_\_\_\_ Business:\_\_\_\_\_

Email Address:\_\_\_\_\_

***Note: Non-resident owners who rent out their unit are required to have a local agent.***

\_\_\_\_\_  
Owner's Signature

\_\_\_\_\_  
Date Signed

*This information is confidential and will be treated accordingly.*

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**Form Instructions**

You may fill out this form electronically using [Adobe Acrobat](#), sign, and email the signed form to [linalak@associahawaii.com](mailto:linalak@associahawaii.com) or mail to the main office: Waialae Place, c/o Associa Hawaii, 737 Bishop Street Suite 3100, Honolulu, Hawaii 96813. You may request a PDF version of this form from Linala.

If you do not have a computer with Adobe Acrobat, you may print your information on this form and mail to the address above.

If you have questions, please contact Linala "Lo" King at (808) 354-2890 or [linalak@associahawaii.com](mailto:linalak@associahawaii.com).

**Office Use Only**

Last Name:

Apt. No:

Animal Registration Approval:

Parking/Locker Number:

Notes:

Hawaiian Telcom

Fiber Optic Internet is at Waialae Place

1 Gig Internet & Wi-Fi with 3-Year

Promotion: \*\$50.00/Month!

(TV and Home Phone Service  
Available, Too!)

## Why Fiber?

100% Fiber Connection - Gigabit & Multi-Gig Speeds Available  
Symmetrical Speeds (Same Upload & Download)  
Perfect for Streaming, Gaming & Remote Work  
Super Reliable - No Slowdowns During Peak Hours  
Increased Property / Business Value

*fi*optics

Spectrum▶

YES

NO

YES

NO

YES

NO

YES

NO

YES

NO

# Waialae Place's Best Internet!

## Plans Starting at \*\$30/Month

Your Property Advisor:

**Jon Kaita**



**(808) 475-8469**

**jon.kaita@hawaiiantel.com**

**Call, Text or Email  
today! Or Scan The  
QR Code To Sign Up!**



\*Promotion and Pricing Subject to Change