



Waikiki Banyan

Tower: _____ Unit #: _____

Owner Name(s): _____

Phone Number: _____ Email: _____

Mailing Address: _____

Emergency Contact: _____

Opt-in:

- ☐ E-mail List
- ☐ Owner Forum

Owner Occupied or Rental?

- ☐ Owner Occupied ☐ Long-Term Rental
- ☐ Short-Term Rental

STR# _____

STR Expiration Date _____

For owner occupied units/long-term rentals, do you need evacuation assistance in the event of an emergency? _____

Property Management Contact Details

Contact Name: _____ Phone #: _____

Company Name: _____ Email: _____

Address: _____

City: _____ Zip Code: _____

Long-Term Resident Details

Contact Name: _____ Phone #: _____

Email: _____

Authorization for Annual Parking Pass Assignment

I authorize the following named person/company to receive: _____
Print Name

EITHER ☐ my parking passes each year until this authorization is revoked or superseded

OR ☐ my parking pass for the year _____ (default if nothing selected)

Owner Signature

Date Signed