



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: _____ Yes No

Do you need assistance evacuating due to a disability?

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EITHER my parking passes each year until this authorization is revoked or superseded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