

HOMEOWNER CONTACT INFORMATION UPDATE

**UNIT NO.: \_\_\_\_- - \_\_\_\_\_\_\_\_**

**OWNER NAME(S): \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**E-MAIL ADDRESS: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**HOME PHONE NO.: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**CELL ULAR PHONE NO.: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**WAVECREST PHONE NO.: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**MAILING ADDRESS: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

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**VEHICLE INFORMATION: \_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_**

**(Color) (Make) (Model) (License Plate No.) (Parking Pass #)**

**PLEASE COMPLETE THE FOLLOWING:**

**Do you have an On-Island Representative: YES NO If yes, Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ [HRS Ch. 521] Phone: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**How often is your unit checked? \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Do you rent out your unit? [Act 326] YES NO If yes, Short Term Long Term**

**Maintenance/Access First Contact Preference: Owner On-Island Rep**

**Updated Information Declaration Page Sent? YES NO**

**Do you have Keys in the Office? YES NO**

**Do you have a Lockbox? YES NO Lockbox Code: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**(Optional)**

**Do you have a Shut-Off Valve in your unit? YES NO**

**Do you have a Washer? YES NO**

**Do you have a Dryer? YES NO**

**Do you have Kayak(s) stored under the cabana? YES NO If yes, QTY?: \_\_\_\_\_\_\_\_**

**Description(s): \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Additional Information:**

**Do you have an Icemaker installed? YES NO**

**Date Updated: \_\_\_\_\_\_\_\_**