



Terrazza, Corte Bella, Las Brisas, & Tiburon

91-1037 Kama'ilio Street Ewa Beach, HI. 96706 Ph: (808)685-5500

We appreciate your taking the time to complete and return this form!

Date: \_\_\_\_\_

Homeowner's Name(s) \_\_\_\_\_

Homeowner's Phone # (Home) \_\_\_\_\_ (Cell) \_\_\_\_\_

Homeowner's Email Address \_\_\_\_\_

Property Address \_\_\_\_\_

Circle One: Terrazza Cortebella Las Brisas Tiburon Lot # \_\_\_\_\_

\*Is this unit owner occupied? Yes ( ) No ( )

If not, owner occupied, please provide owner mailing address:

\_\_\_\_\_  
\_\_\_\_\_

Please check all that apply:

- 1. \_\_\_\_\_ Primary Residence
- 2. \_\_\_\_\_ Secondary Residence
- 3. \_\_\_\_\_ Rental Property\*

POOL KEY FOB NO.1 \_\_\_\_\_ POOL KEY FOB NO.2 \_\_\_\_\_ ACTIVATED: ( ) \_\_\_\_\_

**Vehicle Information**

*It is important that this information remain accurate to keep our neighborhood safe!*

Pass # issued: \_\_\_\_\_ Pick-up date: \_\_\_\_\_ Initials: \_\_\_\_\_ Old #: \_\_\_\_\_

**Vehicles on property:**

- 1. Make \_\_\_\_\_ Model \_\_\_\_\_ Year \_\_\_\_\_ Color \_\_\_\_\_ Lic# \_\_\_\_\_
- 2. Make \_\_\_\_\_ Model \_\_\_\_\_ Year \_\_\_\_\_ Color \_\_\_\_\_ Lic# \_\_\_\_\_
- 3. Make \_\_\_\_\_ Model \_\_\_\_\_ Year \_\_\_\_\_ Color \_\_\_\_\_ Lic# \_\_\_\_\_
- 4. Make \_\_\_\_\_ Model \_\_\_\_\_ Year \_\_\_\_\_ Color \_\_\_\_\_ Lic# \_\_\_\_\_
- 5. Make \_\_\_\_\_ Model \_\_\_\_\_ Year \_\_\_\_\_ Color \_\_\_\_\_ Lic# \_\_\_\_\_

**Pet Information**

*In accordance with TCLT Rules & Regulations only (2) pets are allowed per household*

Any pets in the unit? Yes ( ) No ( )

How many pets? Cats \_\_\_\_\_ Dogs \_\_\_\_\_ Other \_\_\_\_\_

Pet 1 Description: \_\_\_\_\_

Pet 2 Description: \_\_\_\_\_

Animal Chip #(s): (if applies) \_\_\_\_\_

Homeowner Signature: \_\_\_\_\_ Date: \_\_\_\_\_



### Tenant Information

*A copy of the lease agreement is required for non-owner-occupied units and may be sent to:  
 sitemanager@tcltaoao.com*

Name of Tenant(s) \_\_\_\_\_

Have the current Rules & Regulations been submitted to the tenants? Yes ( ) No ( )

Tenant's phone and emergency #: \_\_\_\_\_

Number of persons living in unit \_\_\_\_\_ How many persons under the age of 18? \_\_\_\_\_

Any pets in the unit? Yes ( ) No ( )

How many animals? Cats \_\_\_\_\_ Dogs \_\_\_\_\_ Other \_\_\_\_\_

What type? \_\_\_\_\_

Animal Chip # \_\_\_\_\_

Do you have a separate renters insurance policy? Yes ( ) No ( )

Property Management Information:

Company Name \_\_\_\_\_

Manager Name \_\_\_\_\_

Manager Phone # \_\_\_\_\_

Manager Email Address \_\_\_\_\_

Copy of lease agreement attached? Yes ( ) Emailed ( )

**\*\*\*\*Please ensure tenant vehicle information is completed above\*\*\*\***