



For Office Use Only

Received:

By:

665 Halekauwila Street

Honolulu, Hawaii 96813

Email: leasing@halekauwilaplaceapartments.com

WAITLIST APPLICATION

Every line of this application must be filled in. If an item does not apply to you, write "N/A". The application must be completed, signed, and returned to the property you are applying with before you can be placed on the waiting list.

Head of Household Information:

Head of Household Name	Phone Number	Email Address
Street Address	City, State	Zip Code

Bedroom Preference: ☐ One Bedroom ☐ Two Bedroom ☐ Three Bedroom
☐ Accessible Unit

List all persons that will reside in the home:

Name	Relationship	SSN	Birthdate	Student Status (FT, PT, NA)

List all earned and unearned income received by each household member

Household Member	Type of Income	Monthly Amount	Annual Amount

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Please answer all of the following questions concerning your household

Do you have any pets? List here:	Yes	No
Is any member of the household a student enrolled in an institute of higher education?		
Are you and/or any other household member a US citizen, OR are you and/or other household members non-citizens who have eligible immigration status?		
Have you or co-applicant served in the U.S. Armed Forces?		
Have you ever been convicted of a crime against any person or property?		
Are you or anyone named on this application subject to State Lifetime Sex Offender registration in any state?		
Have you ever been evicted? If so, when?		
Have you ever been convicted of the illegal manufacture or distribution of a controlled substance?		
Are you currently living in HUD subsidized housing?		
Do you currently have a Section 8 Voucher?		
Has your tenancy or subsidy ever been terminated for fraud, nonpayment of rent, or failure to cooperate with recertification procedures?		
Were you or anyone in your household older than 62 as of 1/31/2010 who do not have a Social Security Number? If yes, were you a person in our household receiving HUD rental assistance as of 1/31/2010? <input type="checkbox"/> Yes <input type="checkbox"/> No		

Please provide a complete listing of all states where the applicant and members of the applicant's household have resided:

How did you learn about this apartment community? Is there a resident we can thank for referring you?

This pre-application must be signed and dated to be complete. Incomplete applications will not be placed on the waiting list. Refer to property's Tenant Selection Plan for eligibility requirements for this apartment community.

Individuals with disabilities have the right to request reasonable accommodation in all written notices given to applicants and tenants.

I/We understand that upon receipt of the completed application for tenancy, our name will be placed on the waiting list, processed for admission, or may be rejected based on preliminary eligibility determination. If placed on the waiting list, this application will be recorded by date and time received by Management.

I/We certify that to the best of my/our knowledge, all statements made herein are true and correct. False, fraudulent, and or misleading information disclosed above may be grounds for denial of tenancy or subsequent eviction.

Indigo Real Estate Services and Halekauwila Place are committed to providing equal opportunity in the provision of housing. We do not discriminate on the basis of race, color, religion, sex, disability, national origin or familial status. If you have any questions about the application process, please call the Manager of the building(s) to which you applied.

I CERTIFY THE ACCURACY AND COMPLETENESS OF INFORMATION PROVIDED.

Head of Household	Signature	Date
Co-Head/Spouse/Other Adult	Signature	Date
Co-Head/Spouse/Other Adult	Signature	Date
Co-Head/Spouse/Other Adult	Signature	Date
Co-Head/Spouse/Other Adult	Signature	Date

OFFICE USE ONLY – ACKNOWLEDGEMENT OF RECEIPT OF RENTAL APPLICATION

DATE RECEIVED	TIME RECEIVED	PERSON THAT RECEIVED/REVIEWED	SIGNATURE