NAPILI VILLAS CONFIDENTIAL CONTACT AND REGISTRATION FORM

| OWNERS | UNIT NO(s) |
|---|---|
| NAME: LAST | FIRST |
| MAILING ADDRESS | |
| | |
| PHONE NO | E-MAIL |
| NAME: LAST | FIRST |
| MAILING ADDRESS | |
| | |
| PHONE NO | E-MAIL |
| NAME: LAST | FIRST |
| MAILING ADDRESS | |
| | |
| PHONE NO | E-MAIL |
| IS UNIT YOUR: (please circle one) _PRIMARY RESIDENCE | 2 nd HOME LONG TERM RENTAL |
| Who can provide UNIT ACCESS if you are not available? (Re Lockbox on property? If you authorize <u>emergency entry</u> , please | note the lockbox code here: |
| NAME | |
| PHONE NO E-MAI | |
| | |
| TENANTS: completion of this section is REQUIRED if unit is Please add an additional page if needed to list all adults on lease | rented |
| • | rented |
| Please add an additional page if needed to list all adults on lease | rented |
| Please add an additional page if needed to list all adults on lease | rented FIRST |
| Please add an additional page if needed to list all adults on lease NAME: LAST PHONE NO NAME: LAST | rented FIRST |
| Please add an additional page if needed to list all adults on lease NAME: LAST PHONE NO NAME: LAST | rented FIRST |
| Please add an additional page if needed to list all adults on lease NAME: LAST PHONE NO NAME: LAST PHONE NO RENTAL MANAGEMENT COMPANY / ON ISLAND AGENT – | rented FIRST |
| Please add an additional page if needed to list all adults on lease NAME: LAST | rented FIRST |
| Please add an additional page if needed to list all adults on lease NAME: LAST | rented FIRST |
| Please add an additional page if needed to list all adults on lease NAME: LAST PHONE NO NAME: LAST PHONE NO RENTAL MANAGEMENT COMPANY / ON ISLAND AGENT - RENTAL CO. NAME / ISLAND AGENT NAME: PHONE NO | rented FIRST E-MAIL FIRST E-MAIL On Island Agent REQUIRED if you do not live on island E-MAIL Image: Difference of the second |
| Please add an additional page if needed to list all adults on lease NAME: LAST PHONE NO PHONE NO RENTAL MANAGEMENT COMPANY / ON ISLAND AGENT - RENTAL CO. NAME / ISLAND AGENT NAME: PHONE NO AUTOMOBILE | rented FIRST |
| Please add an additional page if needed to list all adults on lease NAME: LAST | rented FIRST |

Continued on next Page

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| PETS | | | |
|--|-------------|--------------|--|
| ASSISTANCE ANIMAL? | YES | NO | If your unit is rented, ensure tenant info provided |
| | | | tenant nilo provided |
| DOCUMENTATION PROVIDED TO AOAO? | YES | NO | |
| | | | |
| | | | |
| ANIMAL NAME | LICENS | E NO | |
| KIND OF ANIMAL | WEIGHT | Г | |
| DESCRIPTION | | | |
| ANIMAL NAME | _LICENS | E NO | |
| KIND OF ANIMAL | WEIGHT | Г | |
| DESCRIPTION | | | |
| | | | |
| We have the ability to send CRITICAL SMS Text mess | | | |
| IF YOU SAID YES – enter your preferred cell number(| (s) here: _ | | |
| Text messaging would be used infrequently. You can or when time is of the essence to communicate with | | at any time | e, but this is a useful tool in emergencies |
| OPTIONAL: Do you want to OPT-IN to displaying you | ur phone | number al | nd/or email address in the online owner |
| directory available to all owners? Please Choose: | - | | |
| This information is for emergency and management purp Agent promptly at Clifton@QuamProperties.com. Owners Rules. Violation of House Rules by owners, their families | and tena | nts are exp | ected to review and abide by the House |
| My legible signature indicates that this information is | s factual a | and that I a | gree to abide by House Rules: |
| OWNER | | | |
| OWNER | | | DATE: |
| OWNER | | | |
| OWNER | | | DATE: |
| | | | DATE: DATE: |
| OWNER | | | DATE: DATE: DATE: |
| OWNER | | | DATE: DATE: DATE: DATE: DATE: |