NĀPILI VILLAGE
HOTEL

Application/Registration for Long Stay

APPLICANT

Primary Guest's Name: _____

Secondary Guest: _____

Social Security Number: _____

Date of Birth: _____

Present Address: _____

Tenant or Owner? _____

Home Phone: _____   Cell Phone: _____

Email: _____

Period of Long Stay: _____

Reason: _____

Secondary Address: _____

Size of Party: _____   Note that occupancy for Extended Stays is limited to 2 guests per unit

EMPLOYMENT

Employer: _____

Length of Present Employment: _____

Employer's Address: _____

Phone Number: _____

Position: _____

REFERENCES

If renting, name of current landlord: _____

Landlord's Phone Number: _____   Email: _____

Personal Reference: _____

Relationship: _____

Reference's Phone Number: _____   Email: _____

IN CASE OF EMERGENCY

Name: _____

Relationship: _____

Address: _____

Phone Number: _____

Email: _____

I represent that the statements made above are correct and hereby authorize verification of references.

_____
Applicant's Signature