

INCOME

CURRENT SOURCES OF INCOME FROM EMPLOYMENT (For all household members, except minors)

First Name	Name & Address of Employer	Gross Monthly Income
a. _____	_____	_____
b. _____	_____	_____
c. _____	_____	_____
d. _____	_____	_____

OTHER SOURCES OF INCOME – For all household members currently receiving income from sources other than employment, such as Social Security, Pension, Disability, Unemployment, Welfare, V.A. Benefits, Alimony, Child Support or Other (please specify).

First Name	Type of Income	Monthly Amount
a. _____	_____	_____
b. _____	_____	_____
c. _____	_____	_____

ASSETS

OWNERSHIP OF REAL PROPERTY AND/OR BUSINESS – List the name(s) of all household members who will live in the unit and who own any interest in real estate in the United States or who own any interest in a business, and provide the information requested (please attach additional sheet if more space is required).

a. _____
First Name Location of Real Estate (City & State) Land Area Tax Map Key

Ownership in property: %owned _____ Estimated market value of property \$ _____
Outstanding loan balance against property \$ _____

b. _____
First Name Name of business and location

Ownership interest in business: %owned _____ Net worth of business \$ _____

SAVINGS AND CHECKING ACCOUNTS:

First Name	Name and Branch of Savings Institution (bank, credit union, etc.)	Type of Account & Account Number	Amount in Account
a. _____	_____	_____	_____
b. _____	_____	_____	_____
c. _____	_____	_____	_____
d. _____	_____	_____	_____

RETIREMENT ASSETS (IRA, 401K, KEOGH, PENSION PLANS):

First Name	Name of Company	Type of Account	Total Present Value
a. _____	_____	_____	_____
b. _____	_____	_____	_____
c. _____	_____	_____	_____

SECURITIES, STOCKS, BONDS, ETC.:

	First Name	No. of Shares	Issuing Company	Total Present Value
a.	_____	_____	_____	_____
b.	_____	_____	_____	_____
c.	_____	_____	_____	_____

LIABILITIES

Type of Liability	Payee	Account #	Monthly Payment	Amount Owed
<u>Auto Loan</u>	_____	_____	_____	_____
<u>Personal Loan</u>	_____	_____	_____	_____
<u>Charge Accounts, etc.</u>	_____	_____	_____	_____
<u>Other Payables</u>	_____	_____	_____	_____
(Specify)	_____	_____	_____	_____
	_____	_____	_____	_____

RENTAL HISTORY

Beginning with the most recent, please provide your rental history for the past three (3) years:

Landlord's Name	Landlord's Address	Monthly Rent
_____	_____	_____
_____	_____	_____
_____	_____	_____

I hereby certify that the foregoing information is true and correct to the best of my knowledge, and I am fully aware that this application shall be voided and appropriate action will be taken against me for willfully providing false or untrue information.

I hereby acknowledge that I am fully responsible for notifying in writing, Lokahi Pacific, Attn. Program Coordinator, at 1935 Main Street, Suite 204, Wailuku, Maui, Hawaii, 96793 of any change in my mailing address or telephone number(s). I am fully aware that if I fail to notify Lokahi Pacific of such changes and Lokahi Pacific is unable to contact me by mail or telephone, Lokahi Pacific shall remove my name from the waiting list.

Signature of Applicant

Date

Signature of Spouse/Co-Applicant

Date



AUTHORIZATION TO RELEASE INFORMATION

TO: _____

RE: _____
(Account or Other Identifying Number)

I have applied for or obtained a loan or grant from LOKAHI PACIFIC (Lokahi). As part of the process, Lokahi may verify information contained in my request for assistance and in other documents required in connection with the request.

I authorize you to provide to Lokahi for verification purposes the following applicable information:

- Past and present employment or income records.
- Bank account(s), stock holdings, retirement accounts, and any other asset balances.
- Past and present landlord references.
- Other consumer credit references.

If the request is for a new loan or grant, I further authorize Lokahi to order a consumer credit report and verify other credit information.

I understand that under the Right to Financial Privacy Act of 1978, 12 U.S.C. 3401, et seq., Lokahi is authorized to access my financial records held by financial institutions in connection with the consideration or administration of assistance to me. I also understand that financial records involving my loan and loan application will be available to Lokahi without further notice or authorization and may be disclosed or released by Lokahi to another Government agency or department, however, said financial records may not be used for another purpose without my consent except as required or permitted by law.

The information Lokahi obtains is only to be used in the processing of my request for assistance.

A copy of this authorization may be accepted as an original.

Signature

Date

Signature

Date