

Pet Application/Registration Form

Name of pet owner:				
Apartment/unit number:				
Home telephone:			Work:	Cell:
Pet Information				
Please list all pets separately	y:			
Type of pet:	Number	of each kind of pe	et:	
Is dog licensed:	Yes	No		
Does dog or cat have a microchip?	Yes	No		
Pet References:				
Veterinarian:				
Address:			Phone:	
Your Previous Residence:				3
Name of landlord or reside	nt manager:			
Address:				
			OKANOSANNE I MILLER	
Insurance:				
Agency:				
Address:			Phone:	The second second
Pet's Emergency Caretaker:	:			
Name:				
Address:			Phone	

I have read and understand the house rules pertaining to pets and I and members of my household promise to fully comply.				
Signature of pet owner:	Date:			
Approved by:	Date:			



Pet Health Report

Pet's name:	Date:					
Owner's name:	Phone:					
To be completed by ver	terinarian					
Species	Sex	Color	Age		Size	
Dog Cat Other (specify) Vaccinations	Male Female Neutered?	Describe:		Under 12 months 12 months or older		Under 20 lbs. 20-50 lbs. 50 lbs. or over
Canine	Date Vaccinated	Feline		Date Vaccin	ated	
Distemper		Panleukopenia				
Hepatitis		Rhinotracheitis				
Leptospirosis		Calicivirus				
Parvovirus						
Bordetella						

Physical Examination

Condition	Comments	
General appearance		
Coat/skin/nails		
Heart/lungs		
Eyes		
Ears		
Teeth		
Urogenital		
Muscle/bones		
Temperament		
Evidence of flea/tick infestation?	Yes No	
Other		

Comments:	
I certify, as an accredited veterinarian licensed to practice in this state, examined by me on this date and shows no sign of any infectious or cospay/neuter status are as indicated above.	
Veterinarian's Name (please print)	
Address:	Phone:
Veterinarian's Signature:	Date:



PET ADDENDUM Hawaii Association of REALTORS® Standard Form Revised 4/13 (NC) For Release 11/17



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Pro		Reference or Addres	s:	ement dated:				
	TYP	PE	BREED	NAME	AGE	WEIGHT	COLOR	
	Te	nant has been granted	permission by the Lan	dlord to keep only the pet(s) specified	d above under the fo	llowing terms and con	ditions:	
	a.	Tenant shall maintain	control and managem	ent of pet(s) at all times.				
	b.	Tenant shall comply w	ith all governmental ru	ules and laws as well as house rules,	by-laws, declaration	s or any other rules pe	ertaining to pets.	
	C.			pet will be the full responsibility of the All repairs must be done by the end		equired to return the U	nit to its original	
	d.		grounds (if any) treate	s, mites or any other pet related pests ed for all pet related pests by a license				
	e.		will diligently maintain	terinary care of pet(s), ample food an cleanliness of litter pans as well as s ces at all times.				
	f.	Unit if there is reasona abuse, abandonment,	ble cause to believe a aggressive behavior o	orts to contact the Tenant are unsucc an emergency situation exists with res or any prolonged disturbance. In such sponsibility of the Tenant.	spect to the pet(s). E	xamples of an emerge	ency situation includ	
	g.		all indemnify and hold harmless, Landlord, Owner, Brokerage Firm and all of their agents against all liability, judgments, expenses attorney's fees), or claims by third parties for any injury to any person or damage to property of any kind whatsoever caused by pet(s).					
]h.	Tenant is required to carry liability insurance that names Landlord, Owner, Brokerage Firm and agents as additional insureds against any and a claims arising from or associated with the Tenant's pet(s). Tenant shall provide Landlord a current certificate of insurance showing a minimum liability coverage of \$						
	i.	The Tenant shall not a	llow breeding or birthi	ng of pet(s) in the Unit.				
١.	SP	ECIAL TERMS: (Please	Number)					
	=							
		Date	8 	Tenant Signature	- 10 H2	Name (print or ty	pe)	
	-	Date	X 18	Tenant Signature	*	Name (print or ty	pe)	
		Date	-	Landlord Signature	<u> </u>	Name (print or ty	pe)	
		Date	· ·	Landlord Signature		Name (print or ty		

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