



**OWNER AFFIDAVIT RE CONDOMINIUM ASSOCIATION RECORDS
(financial records per HRS 154.5(a)(10)) ***

1. Pursuant to §514B-154.5(a)(10) Hawaii Revised Statutes, your Affiant desires to be provided with copies of:

2. Affiant requests the above-stated information in good faith for the protection of the interests of the association or its members or both and shall not use such information for any improper purpose.

FURTHER AFFIANT SAYETH NAUGHT.

Signature of Affiant Unit Owner or Unit Owner Authorized Agent

Printed name of Affiant Unit Owner or Unit Owner Authorized Agent

STATE OF HAWAII)
) SS.
COUNTY OF _____)

On this ____ day of _____, 20____, before me personally appeared _____, to me known to be the person described, and who executed this Affidavit and acknowledged execution of the same as a free act and deed.

NOTARY CERTIFICATION: This ____-page Affidavit dated _____, 20____ was acknowledged before me by _____ (Name of person signing document), on this ____ day of _____, 20____, in the County of _____, in the _____ Circuit, in the State of Hawaii.

Name: _____

Notary Public - State of Hawaii

My Commission expires: _____

*The Regulated Industries Complaints Office offers this form as a helpful tool for condominium owners and associations for use in the exchange process. Use of this form is not mandatory.