

WRITTEN REQUEST FOR CONDOMINIUM ASSOCIATION RECORDS

Date of Request: _____

To: _____
(Condominium Managing Agent or Board of Directors if self-managed)

Name of Condominium Project: _____

Contact Information:

Name of Person Requesting Documents: _____

Requestor's Address: _____

Residence No.: _____ Business No.: _____

Email Address: _____ Fax No.: _____

- *I hereby confirm that I am:* *an owner in this condominium project* **or** *an agent authorized by the owner(s) and entitled to request receive and/or view the documents identified below.*
- *I hereby request (please check only **one**):* *to examine* **or** *receive copies of the association records identified below.*

Documents Relating to Condominium Operations:	Please indicate the specific month(s) and year(s) for each category:
<input type="checkbox"/> Board of Directors Meeting Minutes:	
<input type="checkbox"/> Financial Statements:	
<input type="checkbox"/> General Ledgers:	
<input type="checkbox"/> Accounts Receivable Ledgers:	
<input type="checkbox"/> Accounts Payable Ledgers:	
<input type="checkbox"/> Check Ledgers:	
<input type="checkbox"/> Common Elements Receipts:	
<input type="checkbox"/> Common Elements Expenditures:	
<input type="checkbox"/> Monthly Statement of Current Delinquency or Unpaid Common Element Assessments:	
<input type="checkbox"/> Condominium Management Agreement:	
<input type="checkbox"/> Insurance Policies: (i.e. Name of insurance company, type of policy, date/year of policy, etc.)	
<input type="checkbox"/> Contracts: (i.e. Name of business, type of contract, date of transaction, etc.)	
<input type="checkbox"/> Invoices: (i.e. Name of business, type of goods or services, date of transaction, etc.)	
Documents Relating to General Condominium Provisions:	
<input type="checkbox"/> Declaration:	
<input type="checkbox"/> Bylaws:	
<input type="checkbox"/> House Rules:	
<input type="checkbox"/> Master Lease:	
<input type="checkbox"/> Sample Original Conveyance Document:	
<input type="checkbox"/> Public Report:	
<input type="checkbox"/> Amended Public Report:	

Documents Relating to Condominium Governance:	Please indicate the specific month(s) and year(s) for each category:
<input type="checkbox"/> Association Meeting Minutes:	
<input type="checkbox"/> Current Member or Owner List:	
<input type="checkbox"/> Names and Addresses of Vendees Under an Agreement of Sale:	
<input type="checkbox"/> Name and Address of Time Share Association Representative/Agent for the Individual Time Share Owners:	
<input type="checkbox"/> Proxies:	
<input type="checkbox"/> Tally Sheets:	
<input type="checkbox"/> Ballots:	
<input type="checkbox"/> Owners' Check-In Lists:	
<input type="checkbox"/> Certificate of Election:	

Condominium Documents Not Listed Above:

Other (Please provide a detailed description of the requested records): _____

I understand that not everything I request may be required to be made available to me; that I may be charged a fee or the cost for copies made and association time spent to process my request; and that I may be required to execute a good faith affidavit.

Signature Date

(Note: You should keep a copy of this form for your records so you can follow-up with your request if necessary.)



*The Regulated Industries Complaints Office (RICO), 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.** For information about what records may be available or to file a complaint, call RICO's Consumer Resource Center (CRC) at (808) 587-4272 (4CRC) or visit us online at cca.hawaii.gov/rico.*