



## Affordable Housing Program

The Park on Ke'eaumoku's Affordable Housing Program is a wonderful way to join the brand new condominium community with full size residences and a down payment of 10%.

You'll enjoy The Park on Ke'eaumoku's open floor plans crafted with comfort and care, floor-to-ceiling glass windows, a private open-air lanai with every unit, secured covered parking, and seamless access to a selection of amenities at the multi-acre development

such as an infinity pool, private cabanas, movie theatre, yoga and fitness studios, private party rooms with an outdoor lanai, and barbeque pavilions.

There are City & County restrictions on qualifying to purchase through the Affordable Housing Program and specific rules should you need to sell your property within the restricted period. The intent of the program is to provide affordable housing to the people of Hawaii for generations to come.

### STEPS TO APPLY

**1** Visit The Park on Ke'eaumoku's website or pickup an information packet at our Sales Gallery at 1440 Kapiolani Blvd., Suite 1020 (open daily from 10 am – 5:30 pm) to meet with one of our Sales Consultants to help guide you through the process. If you are working with a broker, your agent must accompany you on your first visit to the Sales Gallery.

**2** Verify that you meet the basic qualifications for the Affordable Housing Program.

1. Be a citizen of the United States or a resident alien.
2. Be at least eighteen (18) years of age.
3. Be domiciled in the State of Hawaii and have a bona fide intent to physically reside in the AH unit as an owner-occupant for the duration of the restriction period.
4. Total gross household income does not exceed the unit's designated income limit.
5. The total net available household asset does not exceed the purchase price of the unit.
6. Be a person or household member who, either oneself or together or with a household member, do not own or have not owned for three years prior to this application, a majority interest in fee simple or leasehold lands suitable for dwelling purposes.
7. Not be a person who has previously received assistance under a program designed and implemented by any State or county agency to assist persons to purchase affordable housing units.

**3** Meet in-person or virtually with a Loan Officer from one of The Park's Project Lenders to determine eligibility and qualification. The Loan Officer will determine what price range and type of unit will work for you within the Affordable Program guidelines. An Income Verification Worksheet will be filled out and Qualification Letter provided.

#### Document List for Lenders

- 2 years of Federal taxes
- 2 years of W2's and 1099's
- Paystubs or equivalent covering a 2-month period
- Bank statements showing interest rate or interest earned
- Gift letter, divorce decree, marriage certificate, etc. if applicable
- Identification of all household members
- If a household member has no income, then they can write a letter stating the time period they haven't worked AND that they do not intend to work for at least 1 year
  - o Providing a reason is helpful, but not required unless requested by DPP

**4** Once qualified, the Loan Officer will provide you a completed Income Verification Worksheet and Qualification Letter. Bring these documents and all your supporting documents listed above to the Park's Sales Consultant for review. You must also complete and turn in the Affidavit and Application forms before selecting a unit.

## STEPS TO APPLY

- 5** When selecting a unit, you must return the following completed documents and your application fee to your Park's Sales Consultant for review.
  - Affidavit of Eligibility for City-Regulated Affordable Housing Units
  - Application for City-Regulated Affordable Housing Units
  - Affidavit of Intent to Purchase and Reside in an Owner-Occupant Designated Residential Condominium Unit (this document must be notarized, and any Title Guaranty Escrow branch will be happy to do that for you by appointment—our Sales Consultant can help set it up).
  - Income Verification Worksheet and Qualification Letter (provided by the lender)
  - A check or money order in the amount of \$75.00 for the review fee made payable to “The City and County of Honolulu”.
- 6** Your completed application packet with your first choice of unit will be submitted to the City & County for final review. They may request additional information, which must be provided in a timely manner. Your \$75.00 check will be mailed into the city for processing.
- 7** Upon City and County acceptance, you will be contacted by our Sales Consultant to sign a sales contract and put down \$1,000 towards your initial deposit. The balance of 5% will be due at the end of your 30-day right to review and cancel. A final 5% will be due three months later (120 days after signing your contract).
- 8** Your Sales Consultant and Loan Officer will stay in touch during the construction of the building to provide further information and timelines as completion nears.

## FREQUENTLY ASKED QUESTIONS

Are the affordable units fully integrated into The Park on Keeaumoku project?

Yes, as an affordable housing unit owner you will have the same access to the building and amenities as every other resident in the project.

Are there separate floor plans for the Affordable Housing?

No—our Affordable units feature spacious floor plans you'll find in our Market brochure.

As an affordable owner, will I have access to all of the amenities in the project?

Yes, you will have access to the expansive amenity deck with a movie theatre, infinity pool, private BBQ pavilions, fitness center, sauna, and co-working space.

Is the The Park on Keeaumoku pet friendly?

Yes! (2) pets each under the maximum weight limit of 80 lbs. No pet may exceed eighty (80) lbs. in weight. No infant or juvenile pet of any type or breed, which, when fully grown, is likely to exceed eighty (80) lbs. in weight, may be kept in the Project.

How much is the Deposit?

A 10% total deposit is required within the first 120-days of signing the sales contract which payments are broken down into three (3) payments. An initial \$1,000 deposit will be required at contract signing. A second 5% deposit less your initial \$1,000 initial payment is due at the end of your 30 day rescission period. A third and final deposit of 5% is due 120 days after contract signing.

What are the Eligibility Requirements?

There are seven (7) eligibility requirements for this affordable housing offering that prospective buyers need to confirm at the time of submitting their application:

1. Be a citizen of the United States or a resident alien.
2. Be at least eighteen (18) years of age.
3. Be domiciled in the State of Hawaii and have a bona fide intent to physically reside in the AH unit as an owner-occupant for the duration of the restriction period.
4. The total gross household income does not exceed the unit's designated income limit.
5. The total net available household asset does not exceed the purchase price of the unit.
6. Be a person or household member who, either oneself or together or with a household member, do not own or have not owned for three years prior to this application, a majority interest in fee simple or leasehold lands suitable for dwelling purposes.
7. Not be a person who has previously received assistance under a program designed and implemented by any State or county agency to assist persons to purchase affordable housing units.

What does "AMI" stand for?

AMI or “Area Median Income” means the Area Median Income determined by the United States Department of Housing and Urban Development (“HUD”) annually for the Honolulu Metropolitan Statistical Area as adjusted for household size and published by Department of Planning and Permitting, City and County of Honolulu (“DPP”).

**Does my affordable housing unit come with parking?**

Every affordable housing unit at The Park on Keeaumoku includes one (1) parking stall. If you do not have a need for a parking stall, you have the option to reduce your purchase price by \$35,000 by returning that stall to the Seller/Developer. Contact a sales representative for details.

**What happens if I need to move out during my Buy-Back Restriction Period?**

Owners who need to sell during their affordable period will need to notify the Director designated by DPP. They must provide The City and County of Honolulu’s Budget of Fiscal Services (BFS) or qualified Non-Profit Housing Trust the first right of refusal.

If they do not purchase the affordable unit, then the owner must sell their unit to a qualified buyer who meets the same AMI group as the original owner and all eligibility requirements from the affordable housing rules. The new buyer will also have to fulfill the remaining affordable period and be approved by DPP.

**Do I need to calculate Shared Appreciation for this property?**

No. If the property is sold within the affordable period, the calculation is simply that the price may not exceed the sum of: (1) The original cost of the affordable housing unit to the owner; (2) The cost of any property improvements added by the owner; and (3) Simple interest on the original cost of the unit plus property improvements by the owner at the rate of one percent (1 %) per year the affordable housing unit has been occupied.

**What is the estimated maintenance fee and what does it include?**

The estimated monthly maintenance fee is approximately \$0.81 cents per square foot plus which includes sewer, water and common area maintenance.

**What is the Restriction Period?**

The restriction period is the period that which the affordable units needs to remain affordable under the affordable housing agreement and the City’s Affordable Program and Restrictions. There is either a 10 year or 30 year affordability period, depending on unit selection.

**What are the Current Household Size and Income Limits?**

2023 income limits for Affordable Housing units designated for households earning:

Household Size	120% of AMI	140% of AMI	Eligible Home Size
1-person household	\$110,040	\$128,380	Studio, 1 Bedroom
2-person household	\$125,760	\$146,720	Studio, 1 Bedroom, 2 Bedroom
3-person household	\$141,480	\$165,060	1 Bedroom, 2 Bedroom
4-person household	\$157,200	\$183,400	2 Bedroom
5-person household	\$169,800	\$198,100	2 Bedroom





Date \_\_\_\_\_

## Affidavit of Eligibility for City-Regulated Affordable Housing Units

To be submitted to the Honolulu Department of Planning and Permitting  
 per Rules to Implement City's Affordable Housing Requirements (3/2019)

Project and Unit		
Project Name <b>Park on Keeaumoku</b>	Applicant name	
Unit No.	___ BR / ___ BA	AMI _____ %

Affidavit of Eligibility for AH Unit	
The undersigned Applicant(s) certify the following:	
I am a citizen of the United States or a resident alien.	<input type="checkbox"/> Yes <input type="checkbox"/> No
I am at least eighteen (18) years of age.	<input type="checkbox"/> Yes <input type="checkbox"/> No
I am domiciled in the State of Hawaii and have a bona fide intent to physically reside in the AH unit for the duration of the restriction period or lease agreement.	<input type="checkbox"/> Yes <input type="checkbox"/> No
My total gross household income does not exceed the unit's designated income limit. See Table A for income limits	<input type="checkbox"/> Yes <input type="checkbox"/> No
I have sufficient gross household income to qualify for a mortgage and spend no more than 33% of gross household income toward monthly housing payments.	<input type="checkbox"/> Yes <input type="checkbox"/> No
I, either individually or with a household member, do not own or have not owned for three years prior to this application, a majority interest in fee simple or leasehold lands suitable for dwelling purposes.	<input type="checkbox"/> Yes <input type="checkbox"/> No
My total net available household asset does not exceed the purchase price of the unit.	<input type="checkbox"/> Yes <input type="checkbox"/> No
I have not previously received assistance under a program designed and implemented by any State or county agency to assist persons to purchase affordable housing units.	<input type="checkbox"/> Yes <input type="checkbox"/> No
<i>The City's Affordable Housing Rules provide waivers and exceptions to some requirements under certain circumstances.</i>	

By signing this Affidavit the undersigned represent(s) and affirm(s) that the undersigned has/have read, understand(s) and agree(s) to the above statements.

- 1) \_\_\_\_\_  
 *Applicant signature*                       *Print name*                       *Date*
- 2) \_\_\_\_\_  
 *Co-applicant 1 signature*                       *Print name*                       *Date*
- 3) \_\_\_\_\_  
 *Co-applicant 2 signature*                       *Print name*                       *Date*



## Application for City-Regulated Affordable Housing Units

To be submitted to the Honolulu Department of Planning and Permitting  
 per Rules to Implement City's Affordable Housing Requirements (3/2019)

Project and Unit		
Project Name	<b>Park on Keeaumoku</b>	Building name (if applicable)
Project address		
Unit No.	___ BR / ___ BA	AMI _____ %

Primary Applicant			
First name		Middle name/initial	
Last name			
Address line 1			
Address line 2			
City		State	ZIP code
Home phone	Mobile phone	Work phone	
Email address			
Photocopy of ID attached: <input type="checkbox"/> Hawaii driver's license <input type="checkbox"/> Hawaii State ID <input type="checkbox"/> Other gov't ID (specify)			

Co-Applicant 1 (if applicable)			
First name		Middle name/initial	
Last name			
Address line 1			
Address line 2			
City		State	ZIP code
Home phone	Mobile phone	Work phone	
Email address			
Photocopy of ID attached: <input type="checkbox"/> Hawaii driver's license <input type="checkbox"/> Hawaii State ID <input type="checkbox"/> Other gov't ID (specify)			



<b>Co-Applicant 2 (if applicable)</b>			
First name		Middle name/ initial	
Last name			
Address line 1			
Address line 2			
City		State	ZIP code
Home phone	Mobile phone	Work phone	
Email address			
Photocopy of ID attached: <input type="checkbox"/> Hawaii driver's license <input type="checkbox"/> Hawaii State ID <input type="checkbox"/> Other gov't ID (specify)			



Primary Household Member			
First name		Middle name/initial	
Last name			
Birth date		Employed? <input type="checkbox"/> Yes <input type="checkbox"/> No	Full-time student? <input type="checkbox"/> Yes <input type="checkbox"/> No
Relationship to Primary Applicant <i>Choose response from options in List (1) below</i>		Self	
<b>Employer 1</b>			
Address 1		Address 2	
City	State	ZIP code	
Start date	Phone		
<b>Employer 2</b>			
Address 1		Address 2	
City	State	ZIP code	
Start date	Phone		
<b>Employer 3</b>			
Address 1		Address 2	
City	State	ZIP code	
Start date	Phone		

- (1) Choices for this category are:
- Self
  - Spouse/Partner
  - Parent
  - Child
  - Sibling
  - Extended Family
  - Friend (not related)
  - Caretaker

Please provide a photo ID for every household member



Household Member 2			
First name		Middle name/initial	
Last name			
Birth date		Employed? <input type="checkbox"/> Yes <input type="checkbox"/> No	Full-time student? <input type="checkbox"/> Yes <input type="checkbox"/> No
Relationship to Primary Applicant <i>Choose response from options in List (1)</i>			
<b>Employer 1</b>			
Address 1		Address 2	
City	State	ZIP code	
Start date	Phone		
<b>Employer 2</b>			
Address 1		Address 2	
City	State	ZIP code	
Start date	Phone		

Household Member 3			
First name		Middle name/initial	
Last name			
Birth date		Employed? <input type="checkbox"/> Yes <input type="checkbox"/> No	Full-time student? <input type="checkbox"/> Yes <input type="checkbox"/> No
Relationship to Primary Applicant <i>Choose response from options in List (1)</i>			
<b>Employer 1</b>			
Address 1		Address 2	
City	State	ZIP code	
Start date	Phone		
<b>Employer 2</b>			
Address 1		Address 2	
City	State	ZIP code	
Start date	Phone		





Household Member 4			
First name		Middle name/initial	
Last name			
Birth date	Employed? <input type="checkbox"/> Yes <input type="checkbox"/> No	Full-time student? <input type="checkbox"/> Yes <input type="checkbox"/> No	
Relationship to Primary Applicant <i>Choose response from options in List (1)</i>			
<b>Employer 1</b>			
Address 1		Address 2	
City	State	ZIP code	
Start date	Phone		
<b>Employer 2</b>			
Address 1		Address 2	
City	State	ZIP code	
Start date	Phone		

Household Member 5			
First name		Middle name/initial	
Last name			
Birth date	Employed? <input type="checkbox"/> Yes <input type="checkbox"/> No	Full-time student? <input type="checkbox"/> Yes <input type="checkbox"/> No	
Relationship to Primary Applicant <i>Choose response from options in List (1)</i>			
<b>Employer 1</b>			
Address 1		Address 2	
City	State	ZIP code	
Start date	Phone		
<b>Employer 2</b>			
Address 1		Address 2	
City	State	ZIP code	
Start date	Phone		



**Household Asset Verification**

*Choose asset type from options in List (2) below*

<b>Asset 1</b> Asset type (2)	Name of financial institution
Current market value	Annual Percentage Yield or mark 0% if none listed

<b>Asset 2</b> Asset type (2)	Name of financial institution
Current market value	Annual Percentage Yield or mark 0% if none listed

<b>Asset 3</b> Asset type (2)	Name of financial institution
Current market value	Annual Percentage Yield or mark 0% if none listed

<b>Asset 4</b> Asset type (2)	Name of financial institution
Current market value	Annual Percentage Yield or mark 0% if none listed

<b>Asset 5</b> Asset type (2)	Name of financial institution
Current market value	Annual Percentage Yield or mark 0% if none listed

<b>Asset 6</b> Asset type (2)	Name of financial institution
Current market value	Annual Percentage Yield or mark 0% if none listed

<b>Asset 7</b> Asset type (2)	Name of financial institution
Current market value	Annual Percentage Yield or mark 0% if none listed

<b>Asset 8</b> Asset type (2)	Name of financial institution
Current market value	Annual Percentage Yield or mark 0% if none listed

- (2) Choices for this category are:
- Bonds
  - Certificate of Deposit (CD)
  - Checking account
  - Life insurance
  - Mutual funds
  - Real estate
  - Savings account
  - Stock
  - Other

Please provide account statements and other supporting documents



**Household Income**  
 Please list all income earners, including those part-time and self-employed.  
 Do not include income of minor children, full-time students up to 23 years old, and live-in aides.

**Income -- Household Member 1**

*Choose income source type from options in List (3) below*

Last name	First name
<b>Income source 1</b> type (3)	Income source 1 Employer name
Annual income	
<b>Income source 2</b> type (3)	Income source 2 Employer name
Annual income	
<b>Income source 3</b> type (3)	Income source 3 Employer name
Annual income	
<b>Income source 4</b> type (3)	Income source 4 Employer name
Annual income	

- (3) Choices for this category are:
- Alimony
  - Child support
  - Gross pay
  - Investment income
  - No income
  - Pension
  - Retirement
  - Social Security
  - Unemployment compensation
  - Other

Please provide pay stubs, bank statements and other supporting documents

**Income -- Household Member 2**

*Choose income source type from options in List (3)*

Last name	First name
<b>Income source 1</b> type (3)	Income source 1 Employer name
Annual income	
<b>Income source 2</b> type (3)	Income source 2 Employer name
Annual income	
<b>Income source 3</b> type (3)	Income source 3 Employer name
Annual income	



<b>Income -- Household Member 3</b>	
<i>Choose income source type from options in List (3)</i>	
Last name	First name
<b>Income source 1</b> type (3)	Income source 1 Employer name
Annual income	
<b>Income source 2</b> type (3)	Income source 2 Employer name
Annual income	
<b>Income source 3</b> type (3)	Income source 3 Employer name
Annual income	

<b>Income -- Household Member 4</b>	
Last name	First name
<b>Income source 1</b> type (3)	Income source 1 Employer name
Annual income	
<b>Income source 2</b> type (3)	Income source 2 Employer name
Annual income	
<b>Income source 3</b> type (3)	Income source 3 Employer name
Annual income	

<b>Income -- Household Member 5</b>	
Last name	First name
<b>Income source 1</b> type (3)	Income source 1 Employer name
Annual income	
<b>Income source 2</b> type (3)	Income source 2 Employer name
Annual income	
<b>Income source 3</b> type (3)	Income source 3 Employer name
Annual income	

(Add pages as needed)



Income limit, AMI group	
Income limit \$ _____	AMI group: %

Table A. Household Income Limits for Affordable Housing (2023)				
To be eligible for City-regulated Affordable Housing, a household's gross income may not exceed the following limits. These figures are updated annually. <b>AMI</b> is the Area Median Income.				
	Income limits for Affordable Housing units designated for households earning:			
			<b>120% of AMI</b>	<b>140% of AMI</b>
1-person household			\$110,040	\$128,380
2-person household			\$125,760	\$146,720
3-person household			\$141,480	\$165,060
4-person household			\$157,200	\$183,400
5-person household			\$169,800	\$198,100

Documentation
<p>Please include the following documentation with this application:</p> <ul style="list-style-type: none"> <li>• Applicant AH eligibility affidavit (<i>Page 1 of this application</i>)</li> <li>• Statement that household member does not intend to work for a year (required if no income is selected)</li> <li>• Most recent two months' pay stubs or other documentation of income, including Social Security and VA benefits</li> <li>• Last two years' tax returns, including W-2s, 1099s and applicable schedules</li> <li>• Bank and other financial institution statements, showing interest rate or interest earned</li> <li>• Mortgage pre-qualification (for sale) or draft lease agreement (rental)</li> <li>• Photo ID of all household members</li> <li>• Other supporting documents (divorce decree, marriage certificate, etc.)</li> </ul>

Under penalties of perjury, I declare that I have examined all of this application, including accompanying documents, and, to the best of my knowledge, information, and belief, all of the statements contained herein are true, correct and complete.

1)	_____	_____	_____
	<i>Applicant signature</i>	<i>Print name</i>	<i>Date</i>
2)	_____	_____	_____
	<i>Co-applicant 1 signature</i>	<i>Print name</i>	<i>Date</i>
3)	_____	_____	_____
	<i>Co-applicant 2 signature</i>	<i>Print name</i>	<i>Date</i>

**FOR INTERNAL USE ONLY**

RECEIVED DATE: \_\_\_\_\_ TIME: \_\_\_\_\_

BY: \_\_\_\_\_

REGISTRATION ID: \_\_\_\_\_

LOTTERY NO.: \_\_\_\_\_

NOTICE TO ALL PERSONS SIGNING THE AFFIDAVIT: This Affidavit is being provided to you pursuant to Part V, Subpart B of the Condominium Property Act (Chapter 514B of the Hawaii Revised Statutes). Part V, Subpart B is referred to as the "**Owner-Occupant Law**" in this Affidavit, and various sections of the Owner-Occupant Law are referenced in this Affidavit. This Affidavit is a legal document that contains promises that are binding on you. If these promises are broken, you could be subject to various penalties that are described in the Owner-Occupant Law and this Affidavit. Therefore, it is strongly recommended that you seek the advice of an attorney if you do not understand anything contained in the Affidavit, or have questions about anything contained in this Affidavit, or do not understand the references to the Owner-Occupant Law or other provisions of the Condominium Property Act that are contained in this Affidavit.

**AFFIDAVIT OF INTENT TO PURCHASE AND RESIDE IN AN  
OWNER-OCCUPANT DESIGNATED RESIDENTIAL CONDOMINIUM UNIT**

We, the undersigned "owner-occupants," on this \_\_\_\_ day of \_\_\_\_\_, \_\_\_\_\_, do hereby declare that it is our intention to purchase and reside in a residential condominium unit designated for an "owner-occupant" in THE PARK ON KEEAUMOKU condominium project proposed by KEEAUMOKU DEVELOPMENT, LLC (the "**Developer**").

We understand, affirm, represent, and agree, by signing this Affidavit, that:

1. It is our intent to reserve and purchase an owner-occupant designated residential unit ("**designated unit**") pursuant to Section 514B-96 of the Owner-Occupant Law, and, upon closing escrow, to reside in the designated unit as our principal residence for 365 consecutive days.
2. The term "**owner-occupant**" as used herein is defined in Section 514B-95 of the Owner-Occupant Law as:

"... any individual in whose name sole or joint legal title is held in a residential unit that, simultaneous to such ownership, serves as the individual's principal residence, as defined by the state department of taxation, for a period of not less than three hundred sixty-five consecutive days; provided that the individual retains complete possessory control of the premises of the residential unit during this period. An individual shall not be deemed to have complete possessory control of the premises if the individual rents, leases or assigns the premises for any period of time to any other person in whose name legal title is not held; except that an individual shall be deemed to have complete possessory control even when the individual conveys or transfers the unit into a trust for estate planning purposes and continues in the use of the premises as the individual's principal residence during this period." (Underlining emphasis added)

3. We understand that if two or more prospective owner-occupants intend to reside jointly in the same designated unit, only one owner-occupant's name shall be placed on the reservation list for either the chronological system or the lottery system, as determined by the Developer.
4. At closing of escrow, we shall file a claim for and secure an owner-occupant property tax exemption with the appropriate county office for the designated unit.
5. We have personally executed this Affidavit, and we are all of the prospective owner-occupants for the designated unit. This Affidavit shall not be executed by an attorney-in-fact.
6. We shall not sell or offer to sell, lease or offer to lease, rent or offer to rent, assign or offer to assign, convey, or otherwise transfer any interest in the designated unit until at least 365 consecutive days have elapsed since the recordation of the instrument conveying title to the designated unit to us. Furthermore, we understand that we have the burden of proving our compliance with the law.
7. We understand that no developer, employee, or agent of a developer or real estate licensee shall violate or aid any person in violating the Owner-Occupant Law.
8. We shall notify the Real Estate Commission immediately upon any decision to cease being an owner-occupant.
9. The Real Estate Commission may require verification of our owner-occupant status, and we understand that if we fail to submit such verification because of the sale, lease, assignment, or transfer of the designated unit, we may be subject to a fine in an amount equal to the profit made from the sale, lease, assignment, or transfer of the designated unit.
10. Any false statement in this Affidavit or violation of the Owner-Occupant Law shall subject us to a misdemeanor charge with a fine not to exceed \$2,000, or by imprisonment of up to a year or both. We further understand that if we violate or fail to comply with the Owner-Occupant Law, we shall be subject to a civil penalty of up to \$10,000 or fifty per cent (50%) of the net proceeds received or to be received from the sale, lease, rental, assignment, or other transfer of the designated unit, whichever is greater.

When required by context, each pronoun reference shall include all numbers (singular or plural) and each gender shall include all genders.

By signing this Affidavit we represent and affirm that we have read, understand, and agree to the above statements.

1)	Purchaser's signature		Print Name	Date
2)	Purchaser's signature		Print Name	Date

STATE OF HAWAII  
CITY AND COUNTY OF HONOLULU

SS:

On this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_\_, before me appeared \_\_\_\_\_, to me personally known, who, being by me duly sworn or affirmed, did say that such person(s) executed the foregoing instrument as the free act and deed of such person(s), and if applicable, in the capacities shown, having been duly authorized to execute such instrument in such capacities.

\_\_\_\_\_  
Print Name: \_\_\_\_\_  
Notary Public, in and for said State

My commission expires: \_\_\_\_\_

NOTARY CERTIFICATION STATEMENT

Document Identification or Description: Affidavit of Intent to Purchase and Reside in an Owner-Occupant Designated Residential Condominium Unit

Document Date: \_\_\_\_\_ or  Undated at time of notarization.

No. of Pages: \_\_\_\_\_ Jurisdiction: \_\_\_\_\_ Circuit  
(in which notarial act is performed)

\_\_\_\_\_  
Signature of Notary

\_\_\_\_\_  
Date of Notarization and  
Certification Statement

\_\_\_\_\_  
Printed Name of Notary

(Official Stamp or Seal)



STATE OF HAWAII  
CITY AND COUNTY OF HONOLULU

SS:

On this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_, before me appeared \_\_\_\_\_, to me personally known, who, being by me duly sworn or affirmed, did say that such person(s) executed the foregoing instrument as the free act and deed of such person(s), and if applicable, in the capacities shown, having been duly authorized to execute such instrument in such capacities.

\_\_\_\_\_  
Print Name: \_\_\_\_\_  
Notary Public, in and for said State

My commission expires: \_\_\_\_\_

NOTARY CERTIFICATION STATEMENT

Document Identification or Description: Affidavit of Intent to Purchase and Reside in an Owner-Occupant Designated Residential Condominium Unit

Document Date: \_\_\_\_\_ or  Undated at time of notarization.

No. of Pages: \_\_\_\_\_ Jurisdiction: \_\_\_\_\_ Circuit  
(in which notarial act is performed)

\_\_\_\_\_  
Signature of Notary

\_\_\_\_\_  
Date of Notarization and  
Certification Statement

\_\_\_\_\_  
Printed Name of Notary

(Official Stamp or Seal)