

Lanikai Vacation Rentals, LLC

Vacation Rental Agreement

Office Address

390 Papaloa Road, Kapaa, HI 96746

808-822-7700 / 808-822-7456 fax

lanikaivr@gmail.com

Today's Date: _____
 Guest Name: _____
 Guest Address: _____
 Contact Number: _____ Cell # _____
 E-mail: _____

Aloha, and thank you for your reservation. Please fill in the requested information to assist us in providing you with a comfortable and memorable stay on our beautiful island of Kauai.

Guest Names (age if minor)

1	_____	5	_____
2	_____	6	_____
3	_____	7	_____
4	_____	8	_____

Maximum occupancy: 4 people, unless an exception has been made by the owner**

This contract constitutes an Agreement between the Guest(s) and Lanikai Vacation Rentals, LLC the authorized managing agent. Agent agrees to rent to the Guest, jointly and severally, the residential dwelling described below for the terms and conditions stated below:

Description of the unit: Two-bedroom, two bathroom, oceanfront condominium at Lanikai #123
 Arrival Date: _____ C/I Time 3:00 pm
 Date Out: _____ C/O Time 10:00 am
 Length of Stay: _____ 0 _____ nights

0 nights at nightly rate of		\$	0.00
G.E.Tax / 4.166%	0.04166		0.00
T.A.Tax / 9.25%	0.0925		0.00
Clean Fee			
Security Deposit	Refundable		_____
Total Due			<u>0.00</u>

PAYMENTS: Payment of entire rental amount may be made by personal check or MasterCard / Visa credit card. Checks must arrive in time to clear the bank. If the bank dishonors a Guest's check payment must be made by Certified Funds.

CANCELLATION / REFUNDS: Full payment is due no later than 60 days prior to the arrival date. Cancellations made less than 60 days prior to arrival will result in forfeiture of the entire rent, unless the property can be re-rented.

FOLLOWING RECEIPT OF FULL PAYMENT AND PRIOR TO YOUR ARRIVAL DATE DRIVING INSTRUCTIONS AND ACCESS INFORMATION WILL BE PROVIDED TO YOU.

MANDATORY OCCUPANCY DISCLOSURES: It is mandatory to disclose the exact number and names of guests who will be occupying the premises during the rental term. The premises are to be used for residential rental purposes only. No functions or pets allowed at this accommodation. Lanikai Vacation Rentals reserves the right to change or cancel the above reservation should this accommodation become unavailable for rental.

HOUSEKEEPING: The property has been cleaned and prepared prior to Guest's arrival. Fresh linens and towels are in place, when additional consumable supplies are needed it is the responsibility of the Guest to purchase them.

SMOKING: This is a smoke-free property.

NON-LIABILITY AND INDEMNIFICATION OF AGENT & OWNER: The Owners and Agents are not responsible for any accidents, injuries or illnesses that occur while on the premises or use of its facilities. The Homeowners or Agents are not responsible for the loss of personal belongings or valuables of the guests. By accepting this reservation, it is agreed that all guests are expressly assuming the risk of any harm arising from their use of the premises or others whom they invite to use the premises.

APPROVED AND AGREED:

Guest Signature	Date
	01/00/1900

Agent's Signature	Helen Torres
	Date

Emergency Contact on Kauai: 808-822-7700 Helen: 808-651-2941 cell
Cindy: 808-651-8413 cell

Credit Card Information: MasterCard or Visa

Account Number / Expiration Date / Security Code / Name on Credit Card