



Change of Address Form for Billing & Correspondence

Please Fax or Mail this form to:

FAX (Oahu): (808) 593-6333

MAILING ADDRESS:

Hawaiiana Management Company, Ltd.
711 Kapiolani Blvd., Suite 700
Honolulu, HI 96813

ATTN: ADDRESS CHANGE

Owner Name(s):

Property Name : Maui Lani Community Assn.

Unit # :

BILLING ADDRESS

(Required Information – please print)

Name (if changes)*:

Address line 1:

Address line 2:

City/State/Zip:

CORRESPONDENCE ADDRESS

☐ Same as billing address above

Name (if changes)*:

Address line 1:

Address line 2:

City/State/Zip:

E-mail Address:

Name (Please Print)

Signature

Date

* To change or update the spelling of a name, one of the following documents must be submitted: 1) birth certificate; 2) marriage certificate or 3) deed. *Please note* that a name change refers to a **spelling correction or update only**, and not to a change of ownership.

(For Office Use Only)

Project Accountant: Tisa Romano