

**Local Representative:**

Allure Building Documents require that you designate someone to be your Local Representative if you are away from your Unit for more than 30 days at a time.

Representative Name: \_\_\_\_\_ Company: \_\_\_\_\_

Cell Phone #: \_\_\_\_\_ Office Phone #: \_\_\_\_\_

Email: \_\_\_\_\_

Address: \_\_\_\_\_

- In order for this authorization to be valid, both the Home Owner's AND the Local Representative's signatures must be valid and present on this form.
- This representation agreement will remain valid until Allure Waikiki Management is notified in writing by either the Home Owner or Local Representative Entity.

Select one of the following, **indicate your selection by initialing in the box.**

Communication will be made with both the Home Owner and Local Representative.

OR

Communication will be made primarily with the Local Representative.

Please check any of the following exceptions:

Emergency situations related to your Unit (Blood/Flood/Fire)

Other: \_\_\_\_\_

➤ I hereby authorize and appoint the person(s) listed above to be my local representative on my behalf while I am away from my Unit.

Home Owner Printed Name: \_\_\_\_\_

Home Owner Signature: \_\_\_\_\_ Date: \_\_\_\_\_

➤ I hereby verify the above information to be correct and consent to be the Local Representative for this Unit.

Local Representative Printed Name: \_\_\_\_\_

Local Representative Signature: \_\_\_\_\_ Date: \_\_\_\_\_