



**Vacation Rental Management Agreement and
Long Term Property Management Agreement
Standard Provisions**

TERM SHEET

Owner(s): _____

Property: _____ TMK _____

1. AGENT: HawaiiVacationRentalOnline.com, 75-5801 Alii Dr., Suite A 1, Kailua-Kona, HI 96740
 Phone: 808-331-3445, Toll Free: 888-745-8085, Email: info@hawaiiirealtybrokers.com
 Website: www.HawaiiVacationRentalOnline.com

2. TERM: This agreement shall be effective on _____, 20____ and shall terminate upon sixty (60) days' **written** notice by either party or a sales of property (See paragraph 5 of Agreement) or upon mutual consent of Owner and Agent.

3. PROPERTY: COMPLEX/SUBDIVISION _____ UNIT # _____

ADDRESS _____

UNIT TELEPHONE # _____ ASSIGNED PARKING STALL _____

TAX MAP KEY _____

Sq. Ft: _____ # Bedrooms _____ # Bath _____ Max Occupancy _____

4. OPTIONAL SERVICES: Owner has the option to have Agent pay utility and maintenance bills for property. For each payment there will be a **\$3.00** fee for internet banking. Owner's INITIALS _____

Phone	Yes _____	No _____	Property Taxes	Yes _____	No _____
Electric	Yes _____	No _____	Insurance	Yes _____	No _____
Cable	Yes _____	No _____	Lease Fee	Yes _____	No _____
Water	Yes _____	No _____	Yard Maintenance	Yes _____	No _____
Gas	Yes _____	No _____	Pool Maintenance	Yes _____	No _____
Maintenance/Association Fee	Yes _____ No _____				
Other	_____				
Other	_____				

5. OWNERS: PRINT legal name and Address of all Owner(s) on title of subject property

Name: _____ Address: _____
 Name: _____ Address: _____
 Name: _____ Address: _____

6. TAXES, CHECKS, STATEMENTS, 1099's: Name of the person or entity who is to receive checks, statements and the Annual IRS 1099 form: _____

MAILING ADDRESS FOR STATEMENTS, CHECKS, BILLS, 1099's (if different from above)

SSN OR FED ID # of person/entity to receive the checks and 1099 Forms

HAWAII GENERAL EXCISE TAX MUST BE PAID ON THE GROSS RENTS COLLECTED BY ANY PERSON RENTING REAL PROPERTY IN THE STATE OF HAWAII. TRANSIENT ACCOMMODATION TAX IS APPLICABLE FOR RENTALS TOTALLING LESS THAN 180 (CONTINUOUS) DAYS. FEDERAL INTERNAL REVENUE FORM 1099 STATING THE AMOUNTS COLLECTED SHALL BE FILED WITH THE HAWAII DEPARTMENT OF TAXATION ON AN ANNUAL BASIS.

Hawaii GE and TAT # _____ (under Owner's name)

7. PRIMARY CONTACT PERSON:

NAME: _____ EMAIL: _____

PHONE: _____ CELL: _____ FAX: _____

8. EMERGENCY CONTACT PERSON: (if primary contact person is unavailable)

NAME: _____ EMAIL: _____

PHONE: _____ CELL: _____ FAX: _____

9. OWNER'S INSURANCE:

NOTE: Agent shall be named as additional insured on Owner's liability policy. Liability policy must in an amount not less than **\$300,000**. Agent shall be provided with copies of all Owner insurance policies or certificates.

NAME OF AGENT: _____ EMAIL: _____

ADDRESS OF AGENT: _____

PHONE: _____ CELL: _____ FAX: _____

POLICY NUMBER(s) _____ Certificate of Insurance Received

LIABILITY: _____ OTHER: _____

Expiration Date

10. OWNER'S PREFERENCES (Name and phone number)

- A. REPAIR FIRM: _____
- B. PEST CONTROL: _____
- C. ATTORNEY: _____
- D. CLEANING: _____
- E. LANDSCAPE: _____
- F. POOL: _____
- G. OTHER: _____
- H: OTHER _____

11. ACCOUNTING AND AGENT'S FEE:

- A. Agent's Fee: **22%** of gross rents received for vacation rental or **11%** for long term property management.
- B. If rental is a result of efforts of Agent and outside Travel Agents of Contractors, Owner agrees to pay travel agent's commission in addition to Hawaii Realty Brokers' management fees.

- C. Owner to provide Inventory List or there will be a fee of **\$75** to prepare the Inventory List.
- D. Start up Fees: **\$250.00** which includes administrative set up, initial website load, photography, print copy and inspection/inventory check.
- E. Primary Online Booking Service: Owner agrees to pay **\$25** per month for online booking service fee to Agent. Online booking service fee will be deducted from the Owner's reserve fund.

12. OWNER'S RESERVE FUND:

Agent to retain **\$300.00** of Owner's funds for a reserve fund to cover operating expenses. The minimum reserve fund is **\$300.00**. Additional funds may be required for accounts with larger monthly bills. This amount is subject to change if agent deems it necessary.

Make check payable to: HawaiiVacationRentalOnline.com.

13. SPECIAL INSTRUCTIONS TO AGENT:

AGENT: HAWAIIVACATIONRENTALONLINE.COM
75-5801 Alii Dr., Suite A 1, Kailua-Kona, HI 96740

OWNER(S):

Linda M. Kelly
Print Name

Print Name Date

Signature Date

Signature

President
Title

Print Name Date

Signature