

## Hawaii Community Development Authority Planning Office 547 Queen Street Honolulu, Hawaii 96813 (808) 594-0340 FAX (808) 587-0299



## PERMIT APPLICATION Kakaako Community Development District

APPLICANT INFORMATION		
Applicant		TYPE OF REQUEST  ☐ Rules Clearance
Mailing Address		☐ Improvement Permit
		☐ Development Permit
Telephone No.		<ul><li>☐ Conditional Use Permit</li><li>☐ Conditional Use of Vacant Land</li></ul>
Project Site Address		☐ Temporary Use
		<ul><li>□ Development (Makai)</li><li>□ Other</li></ul>
Address  Description of Work to be Done		PARCEL INFORMATION
		Tax Map Key:
		Neighborhood Zone:
PROJECT INFORMATION		NOTE TO APPLICANT
Existing Use and Floor Area (s.f.)	Nature of Work	Please refer to Subchapter 5 of the Mauka
☐ Commercial	☐ New Building * ☐ Repair	Area Rules, Chapter 217, Hawaii Administrative Rules for detailed
	☐ Addition * ☐ Electrical	information on procedures, permit
	☐ Demolition ☐ Plumbing	requirements and fee schedule.
	☐ Alteration	2. Final approval by HCDA is required prior to issuance of a building permit for any
	☐ Other	development within the Kakaako District.
Proposed Use and Floor Area (s.f.)		For approval of building permits, submit the building permit application form and
	Notes:	the following sets of plans:  • Building Department copy
□ Commercial		• Job site copy
☐ Industrial	<del></del>	• HCDA copy (if applicable)
Residential	<del></del>	3. For any project where construction
Other		drawings are not available, submit two (2) sets of project information as listed in
TOTAL		"Filing Procedures".
		4. For any project located within the Special Management Area (SMA) of the Kakaako Makai Area, please consult with the State Office of Planning for SMA use requirements.
agree to comply with all City and County of Honolulu of	rdinances and state laws regulating development and	ject site and state that the information is correct. I hereby building construction and authorize HCDA to inspect the
property or construction upon notification of the undersignment of the u		
Signature (applicant or agent):		Date:
Print name:		Telephone No.:
FOR HCDA USE ONLY:		
Permit Fee: Paid by:		
Landowner's Consent (if applicable):		
Section 206E-5.6 (if applicable):		
Reviewed	Disc	D-4
By HCDA:	Date:	Date: