



County of Hawai'i

DEPARTMENT OF PUBLIC WORKS

PROPERTY OWNER DECLARATION FORM

INSTRUCTIONS

COMPLETE THE SECTIONS BELOW. AN EMAIL ADDRESS IS REQUIRED FOR ALL CONTACTS – ALL COMMUNICATION REGARDING YOUR APPLICATION WILL BE EMAILED.

LOCATION INFORMATION

(VERIFY AT: www.hawaiipropertytax.com/search.html)

PARCEL NUMBER	- - - -
LOCATION ADDRESS	

PROPERTY OWNER INFORMATION *(Owner contact information is required)*

(VERIFY AT: www.hawaiipropertytax.com/search.html)

IF PROPERTY OWNER(S) NAMED BELOW DOES/DO NOT MATCH THE COUNTY'S REAL PROPERTY TAX OFFICE RECORD, PLEASE SUBMIT A COPY OF THE CURRENT OWNER'S PROOF OF OWNERSHIP.

OWNER NAME	
MAILING ADDRESS	
PHONE NUMBER	
EMAIL	

OWNER NAME	
MAILING ADDRESS	
PHONE NUMBER	
EMAIL	

OWNER NAME	
MAILING ADDRESS	
PHONE NUMBER	
EMAIL	

AUTHORIZED AGENT INFORMATION

AGENT NAME	
MAILING ADDRESS	
PHONE NUMBER	
EMAIL	



County of Hawai'i

DEPARTMENT OF PUBLIC WORKS

ADDITIONAL CONTACT INFORMATION (LIMIT 2)

NAME	
MAILING ADDRESS	
PHONE NUMBER	
EMAIL	

NAME	
MAILING ADDRESS	
PHONE NUMBER	
EMAIL	

Pursuant to Hawaii County Code, Section 5-4-1(a)(7), and by my signature below, I certify the following: (1) I am the owner of the property described above or the owner's authorized agent and I consent to the submittal of this permit application; (2) the information in this application is accurate and complete; and (3) I understand that all contacts listed above will receive communication regarding the permit application and plans.

PRINT NAME

SIGNATURE

<p>CHECK THE BOX IF PROPERTY OWNER INFORMATION ABOVE MATCHES RPT'S DATA. If no, proof of ownership is required. Verify at: www.hawaiipropertytax.com/ search.html</p> <input type="checkbox"/>

DATE