

County of Hawai'i

DEPARTMENT OF PUBLIC WORKS

PROPERTY OWNER DECLARATION FORM

INSTRUCTIONS

PARCEL NUMBER
LOCATION ADDRESS

EMAIL

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)

PROPERTY OWNER	INFORMATION (Owner contact information is required)
	opertytax.com/search.html)
IF PROPERTY OWNER(S) NA	AMED BELOW DOES/DO NOT MATCH THE COUNTY'S REAL PROPERTY TAX
OFFICE RECORD, PLEASE SU	UBMIT A COPY OF THE CURRENT OWNER'S PROOF OF OWNERSHIP.
0144150 14145	Г
OWNER NAME	
MAILING ADDRESS	
PHONE NUMBER	
EMAIL	
OWNER NAME	
MAILING ADDRESS	
PHONE NUMBER	
EMAIL	
OWNER NAME	
MAILING ADDRESS	
PHONE NUMBER	
EMAIL	
AUTHORIZED AGEN	IT INFORMATION
AGENT NAME	
MAILING ADDRESS	
DHONE MI IMBED	



NAME

County of Hawai'i

DEPARTMENT OF PUBLIC WORKS

ADDITIONAL CONTACT INFORMATION (LIMIT 2)

MAILING ADDRESS	
PHONE NUMBER	
EMAIL	
NAME	
MAILING ADDRESS	
PHONE NUMBER	
EMAIL	
owner of the property despermit application; (2) the	ode, Section 5-4-1(a)(7), and by my signature below, I certify the following: (1) scribed above or the owner's authorized agent and I consent to the submittal se information in this application is accurate and complete; and (3) I understange communication regarding the permit application and plans.
PRINT N	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