

City and County of Honolulu  
DEPARTMENT OF PLANNING AND PERMITTING  
650 South King Street  
Honolulu, Hawaii 96813

**PLANNING DIVISION MASTER APPLICATION FORM**

Additional data, drawings/plans, and fee requirements are listed on a separate sheet title "Instructions for Filing". *PLEASE ASK FOR THESE INSTRUCTIONS.*

All specified materials described in the "Instructions for Filing" and required fees must accompany this form; incomplete applications will delay processing. You are encouraged to consult with Planning Division staff in completing the application. Please call appropriate phone number given in the "Instructions for Filing".

*Please print legibly or type the required information.*

SUBMITTED FEE: \$ \_\_\_\_\_

**PERMIT/APPROVAL REQUESTED (Check one or more as appropriate):**

<input type="checkbox"/> GENERAL PLAN AMENDMENT	<input type="checkbox"/> SPECIAL USE PERMIT
<input type="checkbox"/> STATE LAND USE BOUNDARY AMENDMENT (<15 acres) From _____ (District) to _____ (District)	<input type="checkbox"/> ZONING DISTRICT BOUNDARY ADJUSTMENT, ADMINISTRATIVE
<input type="checkbox"/> DEVELOPMENT PLAN (DP)/SUSTAINABLE COMMUNITIES PLAN (SCP) AMENDMENT Indicate DP/SCP area _____	<input type="checkbox"/> ZONE CHANGE From _____ (District) to _____ (District)  <input type="checkbox"/> AMEND UNILATERAL AGREEMENT TO ORDINANCE NO. _____
<input type="checkbox"/> PUBLIC INFRASTRUCTURE MAP REVISION (Indicate Map Symbol Request): <input type="checkbox"/> CY (Corporation Yard) <input type="checkbox"/> DSP (Desalination Plant) <input type="checkbox"/> D (Drainage Way (Open Channel)) <input type="checkbox"/> FS (Fire Station) <input type="checkbox"/> GB (Government Building) <input type="checkbox"/> GC (Golf Course) <input type="checkbox"/> P (Parks) <input type="checkbox"/> PS (Police Station) <input type="checkbox"/> PKG (Parking Facility/Transit Center) <input type="checkbox"/> RES (Water Reservoir) <input type="checkbox"/> SPS (Sewage Pump Station) <input type="checkbox"/> STP (Sewage Treatment Plant) <input type="checkbox"/> SW (Solid Waste Facility) <input type="checkbox"/> TC (Transit Corridor) <input type="checkbox"/> R (Arterial & Collector Roadway) <input type="checkbox"/> W (Potable Well)	

(Project/Parcel specific information should be provided for General Plan and Development Plan amendments only if appropriate.)

TAX MAP KEY(S): \_\_\_\_\_

STREET ADDRESS/LOCATION OF PROPERTY: \_\_\_\_\_

APPLICATION/SUBJECT AREA (Acres/sq.ft.): \_\_\_\_\_

THE PROPOSED PROJECT IS LOCATED  INSIDE  OUTSIDE THE:

- Urban Growth Boundary
- Urban Community Boundary
- Rural Community Boundary

OF THE \_\_\_\_\_ DEVELOPMENT PLAN/SUSTAINABLE COMMUNITY PLAN  
ZONING DISTRICT(S): \_\_\_\_\_ STATE LAND USE DISTRICT: \_\_\_\_\_

**RECORDED FEE OWNER:**

Name (& title, if any) \_\_\_\_\_  
 Organization \_\_\_\_\_  
 Mailing Address \_\_\_\_\_  
 \_\_\_\_\_  
 Phone Number \_\_\_\_\_  
 \_\_\_\_\_  
 Signature \_\_\_\_\_

**APPLICANT:**

Name \_\_\_\_\_  
 Organization \_\_\_\_\_  
 Mailing Address \_\_\_\_\_  
 \_\_\_\_\_  
 Phone Number \_\_\_\_\_  
 \_\_\_\_\_  
 Signature \_\_\_\_\_

**PRESENT USE(S) OF PROPERTY/BUILDING:**

\_\_\_\_\_  
 \_\_\_\_\_

**AUTHORIZED AGENT/CONTACT PERSON:**

Name \_\_\_\_\_  
 Mailing Address \_\_\_\_\_  
 \_\_\_\_\_  
 Phone Number \_\_\_\_\_  
 Signature \_\_\_\_\_

**PROJECT NAME** (If any): \_\_\_\_\_  
 \_\_\_\_\_

**REQUEST/PROPOSAL** (Briefly describe the nature of the request, proposed activity or project):

\_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_