



KONA
COMMUNITY HOSPITAL
Care You Can Count On

Hawaii Health Systems Corporation
3675 Kilauea Avenue
Honolulu, Hawaii 96816

TO: 1. Agency-Maintained Public Files for Chapter 343 HRS Exemption Determinations
2. Office of Environmental Quality Control, if publication by OEQC is desired
3. Hawaii Health Systems Corporation

FROM: Anne E. Lopez, Chief Operating Officer/General Counsel

SUBJECT: Exemption Notice for Office and Conference Room Improvements for Kona Community Hospital

DATE: 6/8/2021

AGENCY OR APPLICANT ACTION

Check applicable box

- This exempted action is an agency action as defined by Section 343-5(b), Hawai'i Revised Statutes (HRS), and Section 11-200.1-8, Hawai'i Administrative Rules (HAR),
- This exempted action is an applicant action as defined by Section 343-5(e), HRS, and Section 11-200.1-9, HAR

EXEMPTION TYPE:

The Exemption Notice for the action described below is based on the general types enumerated in Section 11-200.1-15(c), Hawai'i Administrative Rules (HAR), Exemption Type (c)1 Operations, repairs, or maintenance of existing structures, facilities, equipment, or topographical features, involving minor expansion or minor change of use beyond that previously existing;

As applicable, the exemption for the action described below is also supported by the Exemption List for the [name of agency], reviewed and concurred to by the Environmental Council on [date of concurrence].

- Exemption List Class ____.
- Item Number ____.
- Applicable language from the exemption list: [Click here to enter text.](#)

DESCRIPTION OF ACTION

Proposing Agency or Applicant: Hawaii Health System Corporation

KONA COMMUNITY HOSPITAL
HAWAII HEALTH SYSTEMS CORPORATION
79-1019 Haukapila Street
Kealahou, HI 96750
(808) 322-9311



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Anticipated Start Date: 8/15/2021

Anticipated End Date: 12/30/2021

Island and District: Hawai'i South Kona

Tax Map Key(s) and other geolocation means: 7-9-010:081

All Necessary Permits and Approvals: Plan Approval, Building, Electrical, Plumbing



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NARRATIVE

Describe the action and why it qualifies for the exemption: [Click here to enter text.](#)

RECEIVING ENVIRONMENT

Describe the site, including any impacts on the receiving environment: [Click here to enter text.](#)

ENVIRONMENTAL ANALYSIS

I have considered the potential effects of the proposed project and all related activities against the criteria checked below:

| | Not Applicable |
|--|--------------------------|
| <input type="checkbox"/> Land Use and Zoning Conformance | <input type="checkbox"/> |
| <input type="checkbox"/> Traffic (Vehicles, Bicycles, Pedestrian) | <input type="checkbox"/> |
| <input type="checkbox"/> Infrastructure (Roads, Buildings, Utilities) | <input type="checkbox"/> |
| <input type="checkbox"/> Air Quality Pollutant Emissions | <input type="checkbox"/> |
| <input type="checkbox"/> Noise Emissions | <input type="checkbox"/> |
| <input type="checkbox"/> Solid, Hazardous, and Liquid Waste Management | <input type="checkbox"/> |
| <input type="checkbox"/> Social | <input type="checkbox"/> |
| <input type="checkbox"/> Economic | <input type="checkbox"/> |
| <input type="checkbox"/> Health and Safety | <input type="checkbox"/> |
| <input type="checkbox"/> Recreation | <input type="checkbox"/> |
| <input type="checkbox"/> Public Beach Access | <input type="checkbox"/> |
| <input type="checkbox"/> Cultural Resources and Practices | <input type="checkbox"/> |
| <input type="checkbox"/> Visual/Aesthetic | <input type="checkbox"/> |
| <input type="checkbox"/> Environmental Justice | <input type="checkbox"/> |
| <input type="checkbox"/> Rare, Threatened, and/or Endangered Species | <input type="checkbox"/> |
| <input type="checkbox"/> Surface and Ground Water Resources | <input type="checkbox"/> |
| <input type="checkbox"/> Wetlands | <input type="checkbox"/> |
| <input type="checkbox"/> Floodplains | <input type="checkbox"/> |
| <input type="checkbox"/> Riparian/Coastal Resources | <input type="checkbox"/> |
| <input type="checkbox"/> Other | <input type="checkbox"/> |

Comments/summary of impact analysis: [Click here to enter text.](#)



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MITIGATION

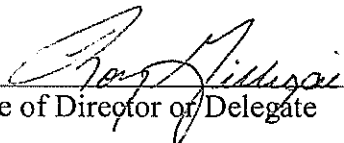
Describe all mitigation measures and best management practices planned to address impacts during the project activities and after project completion: Click here to enter text.

CONSULTATION

The following parties have been consulted about this declaration exemption (Name, affiliation, consultation date): Click here to enter text.

EXEMPT DECLARATION

The direct, cumulative, and potential impacts of the action described above have been considered pursuant to Chapter 343, Hawai'i Revised Statutes and Chapter 11-200.1, Hawai'i Administrative Rules. I declare that the action described above will have minimal or no significant impact on the environment and is therefore exempt from the requirement to prepare an environmental assessment.



Signature of Director or Delegate

5-19-21

Date

- This document is on file in our office and is available for public review.
- This document has been submitted to the Office of Environmental Quality Control for publication in *The Environmental Notice*.