



**STATE OF HAWAII**  
**DEPARTMENT OF LAND AND NATURAL RESOURCES**  
**COMMISSION ON WATER RESOURCE MANAGEMENT**  
**STREAM CHANNEL ALTERATION**  
**PERMIT APPLICATION**

For Official Use Only:

**Instructions:** Please print in ink or type and send one (1) completed hardcopy and one (1) digital copy of the application with attachments to the Commission on Water Resource Management, P.O. Box 621, Honolulu, Hawaii 96809. Applications must be accompanied by a non-refundable filing fee of **\$25.00** payable to the Department of Land and Natural Resources. The Commission may not accept incomplete applications without the required signatures. For assistance, call the Stream Protection and Management Branch at **587-0234**. For further information and updates to this application form, visit <http://dlnr.hawaii.gov/cwrm>.

Check here to allow Commission staff to communicate primarily via e-mail.  
 Legally required and other key correspondence will still be transmitted via postal mail.

**PERMIT TYPE:**

1. Permit Applying For:  New  After-The-Fact  
 2. Type of Construction:  Installation  Modification  Removal

**APPLICANT INFORMATION**

3. APPLICANT'S NAME / COMPANY	Applicant's Contact Person	Applicant's Phone
Applicant's Mailing Address	Applicant's E-mail Address	

Check here if project will impact multiple landowners. If project impacts multiple landowners, skip **Item 4** below, then complete and attach **Form LND-APP** to identify and verify landowner's approval of proposed stream channel alteration work.

4. LANDOWNER'S NAME / COMPANY	Landowner's Contact Person	Landowner's Phone
Landowner's Mailing Address	Landowner's E-mail Address	

5. CONSULTANT'S NAME / COMPANY	Consultant's Contact Person	Consultant's Phone
Consultant's Mailing Address	Consultant's E-mail Address	

6. CONTRACTOR'S NAME / COMPANY	Contractor's Contact Person	Contractor's Phone
Contractor's Mailing Address	Contractor's E-mail Address	

**STREAM INFORMATION**

7. Island: (Check only one)  Kauai  Oahu  Molokai  Lanai  Maui  Hawaii

8. Tax Map Key(s) List all affected tax map key parcels.

9. Stream / Gulch Name(s) List all affected streams and/or gulches.

<b>FOR OFFICIAL USE ONLY:</b>	SWHU ID: _____	FILE ID: _____
LAT: _____	GWHU ID: _____	DOC ID: _____
LON: _____	REACH ID: _____	

**GENERAL PROJECT INFORMATION**

**10. Project Type:** Check all that apply.

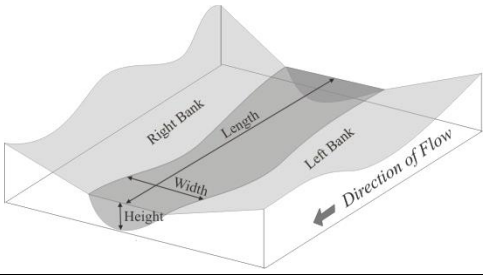
- |   |  |  |   |                                     |   |
|---|--|--|---|-------------------------------------|---|
| <input type="checkbox"/> Bank Stabilization | <input type="checkbox"/> Bridge          | <input type="checkbox"/> Channel Alignment | <input type="checkbox"/> Channel Lining | <input type="checkbox"/> Culvert    | <input type="checkbox"/> Dam / Dike / Weir  |
| <input type="checkbox"/> Desilting Area     | <input type="checkbox"/> Drainage Outlet | <input type="checkbox"/> Dredging          | <input type="checkbox"/> Ford Crossing  | <input type="checkbox"/> Grading    | <input type="checkbox"/> Levee / Flood Wall |
| <input type="checkbox"/> Restoration        | <input type="checkbox"/> Retaining Wall  | <input type="checkbox"/> Retention Basin   | <input type="checkbox"/> Stream Gage    | <input type="checkbox"/> Sewer Line | <input type="checkbox"/> Water Line         |
| <input type="checkbox"/> Other - Describe:  |  |  |   |                                     |   |

**11. Project Site Location(s):** Provide site coordinates of downstream-most point of project in degrees, minutes, seconds (NAD83).

Latitude:      °      '      "      Longitude:      °      '      "      Elevation:      ft. above mean sea level

**12. Structure Dimensions:** (feet)  
 Provide generalized dimensions for the entire project / structure area. If the project includes a pipe (e.g., culvert, drain, etc.), provide the pipe diameter.

Width: \_\_\_\_\_  
 Height: \_\_\_\_\_  
 Length: \_\_\_\_\_  
 Diameter: \_\_\_\_\_



**13. Structure Location:**  
 Provide the general location of the stream channel alteration structure in relation to the streambank.

Left bank (downstream view)  
 Right bank (downstream view)  
 Across entire stream channel

**14. State Land Use Classification:** (Check all that apply)     Agriculture     Conservation     Rural     Urban

**LEGAL REQUIREMENTS**

If required, the permits or approvals below must be obtained before the Commission on Water Resource Management can legally issue a permit. Visit the Commission's Applications & Forms webpage (<http://dlnr.hawaii.gov/cwrm/info/forms/>) for links to agency websites/contact information.

**15. Conservation District Use Permit (CDUP):** To find out if your stream channel alteration project is located in a Conservation District (CD), you may visit to the Land Use Commission (LUC) website at <http://luc.hawaii.gov/maps> to view Land Use District Boundary maps. If the stream channel alteration will be located in a CD, contact the Department of Land and Natural Resources' Office of Conservation and Coastal Lands (OCCL) at (808) 587-0377 to determine if a CDUP is required.

- Stream channel alteration is in a Conservation District.
- Required. CDUP #: \_\_\_\_\_ Date CDUP approved: \_\_\_\_\_
- Not Required. Attach documentation from Office of Conservation and Coastal Lands (OCCL), Department of Land and Natural Resources.
- I have not checked with the OCCL about whether or not a CDUP is required.
- Stream channel alteration is not in a Conservation District.

**16. Special Management Area Permit (SMAP):** To determine if an SMAP is necessary, contact your County Planning Department.

- Required. SMAP #: \_\_\_\_\_ Date SMAP approved: \_\_\_\_\_
- Not Required. Attach documentation from applicable County agency.
- I have not checked with the County about whether or not an SMA Permit is required.

**17. State Historic Preservation Division (SHPD), Department of Land and Natural Resources:** If the parcel(s) affected by the stream alteration has been reviewed by the State Department of Land and Natural Resources Historic Preservation Division (SHPD or through an OEQC Environmental Review, Special Management Area Permit, etc.), check "yes" and attach any relevant documentation from SHPD. If the affected parcel(s) has not undergone SHPD review, attach a photograph of the affected area, a schematic diagram (showing the location, access road and infrastructure for the alteration), and a short description of the prior use(s) of the land on which the alteration resides.

\*Please note: You are **strongly advised** to contact the SHPD to obtain a pre-review of your project. In the event that you do not get an HP pre-review and if during the course of either review or the permit itself it is determined that you need SHPD's concurrence, your application or permit may be held in abeyance or denied until issues with HP are resolved. To contact SHPD, please call (808) 692-8015.

- I have consulted the SHPD regarding potential impacts of stream channel alteration activities on historic sites. I have attached applicable documentation from the SHPD.
- I have not consulted with the SHPD regarding potential impacts of stream channel alteration activities on historic sites.

**18. Chapter 343, Hawaii Revised Statutes, Hawaii Environmental Policy Act:**

- An Environmental Assessment was completed, and
- An Environmental Impact Statement was required and has been accepted (attach letter of acceptance).  
 Publication date in The Environmental Notice: \_\_\_\_\_
- A Finding of No Significant Impact has been determined (attach letter).  
 Publication date in The Environmental Notice: \_\_\_\_\_

This project proposes:

- |   |  |
|---|--|
| <input type="checkbox"/> Use of state or county lands, or use of state or county funds      | <input type="checkbox"/> A wastewater treatment unit |
| <input type="checkbox"/> Use within a state conservation district                           | <input type="checkbox"/> Waste-to-energy facility    |
| <input type="checkbox"/> Use within a shoreline setback area                                | <input type="checkbox"/> Landfill                    |
| <input type="checkbox"/> Use within a national or Hawaii registered historic site           | <input type="checkbox"/> Oil refinery                |
| <input type="checkbox"/> Use within the Waikiki Special District                            | <input type="checkbox"/> Power-generating facility   |
| <input type="checkbox"/> The construction, expansion or modification of helicopter facility | <input type="checkbox"/> None of the above 11 items  |

**OTHER REGULATORY REQUIREMENTS**

If the proposed stream channel alteration is subject to the following permits or approvals, indicate by checking the appropriate box below and submit either the approval letter from the appropriate agency or attach a copy of the application form. If the proposed stream channel alteration is not subject to the following permits or approvals, indicate by checking the "N/A" (Not Applicable) field.

	<u>Attached</u>	<u>N/A</u>
19. <b>U.S. Army Corps of Engineers</b> (Harbors and Rivers Act, Section 404, Clean Water Act)	<input type="checkbox"/>	<input type="checkbox"/>
20. <b>State Department of Health, Clean Water Branch</b> (Section 401, Clean Water Act, Water Quality Certification, Best Management Practices Plan)	<input type="checkbox"/>	<input type="checkbox"/>
21. <b>Right-of-Entry or Right-of-Way Permit</b> if the proposed stream channel alteration includes State lands. (Chapter 171, Hawaii Revised Statutes)	<input type="checkbox"/>	<input type="checkbox"/>
22. <b>Hawaii Environmental Policy Act</b> (Chapter 343, Hawaii Revised Statutes; Title 11, Chapter 200, Hawaii Administrative Rules)	<input type="checkbox"/>	<input type="checkbox"/>
23. <b>Soil and Water Conservation District</b>	<input type="checkbox"/>	<input type="checkbox"/>
24. <b>County Certification of "No-Rise"</b>	<input type="checkbox"/>	<input type="checkbox"/>
25. <b>County Grading Permit</b>	<input type="checkbox"/>	<input type="checkbox"/>
26. <b>County Discretionary Permit(s)</b>	<input type="checkbox"/>	<input type="checkbox"/>

**CULTURAL IMPACTS**

Articles IX and XII of the State Constitution, other state laws, and the courts of the State, require government agencies to promote and preserve cultural beliefs, practices, and resources of Native Hawaiians and other ethnic groups. If there is not enough space available, please make a note in the field (e.g., "See attached") and attach all information with this application as requested.

27. Please provide the identity and scope of cultural, historical, and natural resources in which traditional and customary native Hawaiian rights are exercised in the area.

28. Identify the extent to which those resources, including traditional and customary Native Hawaiian rights, will be affected or impaired by the proposed action.

29. What feasible action, if any, could be taken by the Commission on Water Resource Management in regards to your application to reasonably protect Native Hawaiian rights?

**PROJECT DESCRIPTION**

*Please complete the following sections by providing detailed information on the project components identified below. If there is not enough space available, please make a note in the field (e.g., "See attached") and attach all information with this application as requested.*

**30. Describe the overall project scope and objectives.**

**31. Describe existing stream channel and streamflow conditions at the site of the proposed stream channel alteration.**

**32. Identify and describe the project components outlined below**

**A. Materials**

**B. Quantities**

**C. Excavation**

**D. Fill**

**E. Disposal**

**F. Construction methods**

**G. Temporary facilities**

**H. Expected period of time required for construction**

**I. Liability during construction**

**33. Describe the project's consistency with county zoning and development plans.**

**34. Identify potential alternatives to the project and describe the relative costs and benefits of each alternative.**

**SUBMITTALS**

Please submit the following plans, maps, or drawings in legible form, preferably on 8.5" by 11" sheets.

**35. Location Map:** Provide a location map of the proposed project relative to major roadways.

**36. Plans / Elevations / Sections:** Provide a plan view of the proposed stream channel alteration structure in relation to the stream channel and property boundaries. Elevation and section views of the structure in relation to the stream channel should also be provided if available.

**SIGNATURES**

Signing below indicates that the signatories understand and swear that the information provided is accurate and true to the best of their knowledge. Further, the signatories understand that if the permit requested is granted by the Commission on Water Resource Management (Commission), the permit shall be subject to the following conditions:

- 1) The proposed work is to be completed within two (2) years from the date of permit approval.
- 2) The permittee shall notify the Commission, by letter, of the actual dates of project initiation and completion.
- 3) The permittee shall submit a set of as-built plans and photographs to the Commission upon completion of the project.
- 4) The permit may be revoked if work is not started within six (6) months after the date of approval or if work is suspended or abandoned for six (6) months.
- 5) If the commencement or completion date is not met, the Commission may revoke the permit after giving the permittee notice of the proposed action and an opportunity to be heard.

**37. APPLICANT**

<b>Print Name:</b>	<b>Signature:</b>	<b>Date:</b>
--------------------	-------------------	--------------

**38. CONSULTANT**

<b>Print Name:</b>	<b>Signature:</b>	<b>Date:</b>
--------------------	-------------------	--------------

**39. CONTRACTOR**

<b>Print Name:</b>	<b>Signature:</b>	<b>Date:</b>
--------------------	-------------------	--------------

**40. LANDOWNER** (If multiple landowners, skip **Section 53**, then complete and attach **Form SCAP-LND** with appropriate landowner signatures.)

<b>Print Name:</b>	<b>Signature:</b>	<b>Date:</b>
--------------------	-------------------	--------------

## **CHECKLIST FOR A COMPLETE APPLICATION and ITEM DESCRIPTIONS (ITEMS 1 - 14)**

- Fill in the most recent application form (check <http://dlnr.hawaii.gov/cwrm> or call 587-0234 for updates).
- Fill in every line which includes Items 1-40, as indicated (total 8 pages).
- Enclose a check for \$25 payable to the Department of Land and Natural Resources.
- Mark the proposed stream channel alteration location on: the appropriate USGS quad map, TMK map, photo and schematic, and attach to the application.
- Attach Form LND-APP to identify and obtain authorizations for the project if multiple landowners will be impacted.
- Attach a grading plan and cross section profiles showing existing and finish grades, if available.
- Attach documentation from CDUP, SMAP, SHPD when applicable regarding Items 15-17.
- Attach letters from U.S. Army Corps of Engineers, Hawaii Department of Health, Office of Conservation and Coastal Lands, and appropriate county agencies regarding Items 18-26.
- Provide digital copies on CD-ROM or via e-mail, if available.
- Obtain the necessary signatures for the application form.

Send the application and maps, copies, and the filing fee to:

*Commission on Water Resource Management*

*P.O. Box 621*

*Honolulu, HI 96809*

### **PERMIT TYPE**

1. **Permit Status:** Indicate whether this application is for a new stream channel alteration project (including medication or abandonment) or if the project has already been completed and an after-the-fact permit is being applied for.
2. **Type of Construction:** Is the permit application for the installation of a new stream channel alteration, or modification or removal of an existing stream channel structure.

### **APPLICANT INFORMATION**

3. **Applicant's Information:** Fill in the information for the applicant. This should be the entity that will be responsible for the maintenance of the stream channel alteration when the project is completed.
4. **Landowner's Information:** Fill in the information for the landowner of the property where the stream channel alteration will be located.
5. **Consultant's Information:** Fill in the information for the consultant who will assist with plan and design preparation for the subject project.
6. **Contractor's information:** Fill in the information for the contractor who will perform the work on the subject stream channel alteration project.

### **STREAM INFORMATION**

7. **Island:** The island name where the stream channel alteration will be located.
8. **TMK:** Tax Map Key number (generally there is no lot number, but where a parcel is divided into two lots, fill in the lot number)
9. **Stream / Gulch Name:** Name of the stream or gulch where the stream channel alteration will be located.

### **GENERAL PROJECT INFORMATION**

10. **Project Type:** Identify the type of work being performed, and select all that apply to the project.
11. **Project Site Location(s):** Fill in stream channel alteration location coordinates taken from a GPS unit at the project site. Units are Degrees, Minutes and Seconds (seconds should be filled out to at least one decimal place; e.g. 19°59'32.8"N, 155°14'51.5"W). If more than one site, attach separate sheet. Elevations should be provided in feet above mean sea level.
12. **Structure Dimensions:** What are the physical dimensions of the stream channel alteration structure that will be located in or adjacent to the stream channel?
13. **Structure Location:** Will the structure be located on the right or left bank (facing downstream) or across the entire stream channel?
14. **State Land Use Classification:** Identify the current State Land Use Classification.

**Please see header descriptions for remaining Sections in completing Items 15 to 40.**