

State of Hawaii COMMISSION ON WATER RESOURCE MANAGEMENT Department of Land and Natural Resources REQUEST TO TRANSFER WATER USE PERMIT

☐ Groundwater or ☐ Surface Water

Instructions: Please print in ink or type and send completed application to the Commission on Water Resource Management, P.O. Box 621, Honolulu, Hawaii 96809. The Commission may not accept incomplete applications. For assistance, call the Regulation Branch at 587-0225. For further information and updates to this application form, visit http://www.hawaii.gov/dlnr/cwrm.

For	Official	Use	Only
LUUI	Omciai	USC	Omy.

CURRENT PERMIT HOLDER:	
1. (a) PERMITTEE	(b) LANDOWNER OF SOURCE
Firm/Name	Firm/Name
Contact Person	
Address	
Phone Fax	
E-mail	E-mail
Signing below indicates that the signatories understand and	have no objection to this water use permit transfer request.
Signature	Signature
Date	
TO:	LY) IN ENTIRETY <u>or</u> IN PART BY GPD
2. (a) PERMITTEE	(b) LANDOWNER OF SOURCE
Firm/Name	Firm/Name
Contact Person	
Address	
Phone Fax	
E-mail	E-mail
	e conditions of use of the transferred permit including place, quantity, and purpose ter use permit will be issued to document this transfer and the old water use permit and
Signature	Signature
Date	
WATER USE PERMIT TRANSFER INFORMATION	
3. WATER USE PERMIT NO.:	EFFECTIVE DATE OF TRANSFER:
4. WELL/STREAM DIVERSION NAME AND ST	ATE NUMBER:
5. T.M.K. AT SOURCE	
6 ENDISETMK	