## STATE OF HAWAII DEPARTMENT OF LAND AND NATURAL RESOURCES DIVISION OF BOATING AND OCEAN RECREATION

## **COMMERCIAL USE QUESTIONNAIRE**

Company Name:		
Company Representat	tive Name/Title:	
Complete Address:		
		#:
Email:		
2. List all locations v		duct commercial activity, the specific will be utilizing.
Location	Activity	Equipment

3.	How do you plan to access the water? (Please indicate for each location whether you are accessing through private or public land, state or county, etc.)				
4.	Does your method	od of access for any of th	e locations at which you w	vant to operate require	
	a permit or perm Yes	ission from the landown No	er(s)?		
5.	If your answer to question 4 above was "yes", what type of permit/permission do you possess and who is the issuing entity?				
	Location	Landowner Name of Individual or Entity	Type of Permit/Permission Include any Permit #'s if applicable	Telephone Number Best contact for the issuing entity	

6	5. Please submit the following documents concurrently with your commercial unapplication for the division's review:	se permit				
[ ]	General Excise Tax License					
[]	Commercial General liability insurance policy with sufficient coverage limits & naming the State of Hawaii as an additional insured per Hawaii Administrative Rules 13-231-65.					
[ ]	Certificate of Good Standing from Hawaii Department of Commerce and Consumer Affairs (DCCA, BREG), if applicable					
[ ]	Certificate of Compliance from Hawaii Department of Taxation					
[ ]	Letter of Permission from Land Owner for Access to the State Ocean Waters					
[]	Articles of Incorporation or Articles of Organization, if applicable					
[ ]	PUC for vehicle(s), if applicable					
[ ]	] Vessel Certificate of Inspection or approved marine survey, if applicable					
[]	Other:					
	licant's Signature: Date:					
DOBOR STAFF						
Date	Reviewed:					
Revi						
Recommendations or Remarks:						

Last Updated 10/23/2020