

State of Hawaii
Department of Land and Natural Resources
Division of Boating & Ocean Recreation

UPDATE CONTACT INFORMATION FORM

Instructions: The legal tenant must sign this form. Upon completion, return to:

Department of Land and Natural Resources
Division of Boating & Ocean Recreation –
Property Management
4 Sand Island Access Road
Honolulu, HI 96819; Fax no. (808) 587-1977; email: dlnr.bd.doborpm@hawaii.gov

I. GENERAL INFORMATION

Lease/RP No. _____

Tenant Name: _____

II. MAIL BILLS TO:

Billing name: _____
Last name First Name

Billing address: _____
No. and Street

City State Zip Code

Phone numbers: () () ()
Work Home Cellular

() ()
Pager Fax E-mail address

III. MAIL CORRESPONDENCE TO:

Corresp. Name: _____
Last name First Name

Corresp. Address: _____
No. and Street

City State Zip Code

Phone numbers: () () ()
Work Home Cellular

() ()
Pager Fax E-mail address

IV. CERTIFICATION

I hereby certify that I am the legal tenant of the above referenced lease, permit or other agreement or I am an authorized representative of the legal tenant and, if there are multiple tenants on this lease, I have received the consent of each and every tenant to change the above information.

Printed Name _____

Signature _____

Title (if corporation) _____

Telephone no.: _____

Dated: _____