

Division of State Parks Approval:

Division of State Parks, Department of Land and Natural Resources Vessel Special Use Permit (SUP) - Commercial

Kealakekua Bay State Historical Park (KBSHP)

te: Required Information marked with (*). Any changes to your application information must be submitted to Hawai

Permit Number (to be filled out by DSP staff) KBSHP-

EXPIRATION: DEC 31, 2024

e/f/m: Ins:

istrict office with (louner or man	nor of haring	cc. na	ac -1			ow correspond to the 				
1. Permit Status (a New Permit		newal Nan		owner or manag	ger of busine	ss; name	as sr	iown on ariver	s iicen	se or official identifi	cation	, *		
		(First,	Middle, Last)*											
3. Vessel Name (if applicable)								4. Registration (if applicable)	on #*					
5. Vessel Docume		6. Vessel Type:*						(ii applicable)	7. Vessel Document #					
(if applicable, USCG r	eference #)	(1 permit per vessel type)							(if	f applicable)				
8. Overall Vessel Length:		9. Vessel Passenger 0				Capacity:*				10. Total Numbe (covered by permit)	essels*	sels*		
									T	, ,		ı.		
Business Name:*							E	mail Address:*						
Mailing Address*						y*			State	*		Zip Code*		
Business Phone #	*				N	obile #*							cepts Texts:	
												(used omy n	memiceded,	
Business Contact	Name*			A	lternate Cor	tact Nam	e*				FAX #	:		
The following permit conditions apply to those using the waters at Kealakekua Bay State Historic Park (KBSHP) (conditions subject to change):														
				_									it to ununge,	
•				•	_					without a moorin				
	_	_		•	•	g) is allo	we	d unless auth	orize	d by separate DL	NR w	ritten app	oroval.	
•	3. This permit is nontransferable to any other individual or party. 4. Vessels shall not be used to transport people to land at Ka'awaloa Flats or to traverse any portion of Ka'awaloa Flats, including the Captain													
				ess authorized						ion of Ka awaloa	riats,	including	the Captain	
		•	• •		•			• •		ater but shall not	acces	s the shor	eline or land	
				eparate DLNR										
		•		o wake" speed										
										ne, octocrylene,				
	icles, shall be allowed to be used by all visitors to Kealakekua Bay as stipulated under the MLCD rules below. It is encouraged that ing of sun protective clothing be utilized instead of sunscreen when practical. Commercial operators shall ensure that their													
		these guide		e utilizea inste	ad of suns	creen w	nen	practical. Co	mme	rcial operators sn	all en	sure that	tneir	
		_		ntained huma	n waste sv	stem on	boa	ard their vess	el for	use by their pass	enger	s and will	encourage	
the use o					,					use s, then pass			0.100 u. u.g.o	
_	_		ering or int	erfering with	other mari	ne life a	nd n	nammals is p	rohib	ited. Legal distan	ces m	ust be ma	aintained	
from mai														
							Hav	waii State Pa	rk Of	fice at 808-961-9!	540 w	ithin 24 h	ours of the	
	landing and report the nature of the emergency and the need to land. 11. This permit does not authorize any business operation related to soliciting for customers, renting equipment or otherwise promoting a													
				olation of the			'''g '	ioi custoillei	3, 161	iting equipment	Ji Otii	ei wise pi	onioting a	
							t any	y business, ex	cept	in accordance wi	th the	provision	ns of a	
•			e, concessi	on, or other w	ritten agre	ement v	vith	the Board or	its au	uthorized represe	ntativ	e, or as a	llowed by	
HAR Chap								1	_					
				No person sna rces] or its aut					r any	kind, without a w	ritten	permit fr	om tne	
									mitte	d by law, no pers	on sha	all use any	v portion of a	
										ods, wares, food,				
		2, Ord. No. 0												
										nd regulations. A				
			immediat	e suspension of	of this peri	nit and	the	permittee m	ay be	subject to civil a	nd cri	minal per	nalties.	
13. Please su			lity insuran	ce certificate f	for minimu	m of \$1	000	000 00 per (occur	rence and\$2,000,	000 O	∩ in the a	ggregate	
				of Land and N						13a. Expirati		o iii tiic a	ББГСБИСС	
Current Coneral Eurice Tay (CET) License									(mm/dd/yyyy)					
Current	Jeneral I	LACISC TAX (C	LT/ LICETISE	14. Licens	se #*									
I have revie	wed, un	iderstand, ai	nd agree to	abide by all t	he above s	pecial c	ond	itions and re	gulat	ions:				
Dor	mittaa C	ignature:*	/s/							D:	ate:*			
Per		ngnature.	/ 5/ _		Please sign o	type nar	ne al					(r	mm/dd/yyyy)	

This application, when approved and issued by an authorized Department of Land and Natural Resources agent, shall serve as the official permit:

Approval Date: