## KEALAKEKUA BAY STATE HISTORICAL PARK (KBSHP) VESSEL SPECIAL USE PERMIT 2024-2025 NON-COMMERCIAL APPLICATION FORM INSTRUCTIONS

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1. PERMIT STATUS	– Place a " $$ " in the box. First time = New
2. PEMITTEE	<ul> <li>Name of the person as shown on official identification.</li> </ul>
3. VESSEL NAME	<ul> <li>If Applicable. (Usually boats or canoes.)</li> </ul>
4. REGISTRATION#	<ul> <li>If Applicable (Usually starts with HA and six numbers</li> </ul>
5. VESSEL DOCUMENT TYPE	or letters after.)
6. VESSEL TYPE	<ul> <li>U.S. Coast Guard certified? (boats)</li> <li>1 application form for each type of vessel.</li> </ul>
	BOAT       o       Catamaran, Power         CANOE       o       Outrigger, Double Hull         INFLATABLE       o       Rigid Hulled Inflatable Boat, air filled vessels         KAYAK       o       All types including Inflatable         PADDLEBOARD       o       Stand-up, kneeling
7. VESSEL DOCUMENT#	– All numbers.
8. OVERALL VESSEL LENGTH	<ul> <li>In feet and inches.</li> </ul>
9. VESSEL PASSENGER CAPACITY	<ul> <li>The total number of people the vessel can hold.</li> </ul>
10. TOTAL# OF VESSELS	<ul> <li>The number of vessel(s).</li> </ul>
• MAILING ADDRESS	<ul> <li>Address you want postal mail addressed to.</li> </ul>
• PHONE #	<ul> <li>Home telephone number.</li> </ul>
o MOBILE #	<ul> <li>Mobile cell phone number.</li> </ul>
• MOBILE ACCEPTS TEXT	– " $$ " if mobile phone accepts text.
• EMAIL ADDRESS	<ul> <li>Enter Permittee's e-mail address.</li> </ul>
• EMERGENCY CONTACT NAME	<ul> <li>Enter in a contact name for emergencies.</li> </ul>
• EMERGENCY PHONE NUMBER	<ul> <li>Enter telephone number of emergency contact.</li> </ul>
• EMERGENCY MOBILE #	<ul> <li>Enter mobile cell phone number of emergency contact.</li> </ul>
• ORGANIZATION NAME	<ul> <li>Non-Commercial organization name.</li> </ul>
• ORGANIZATION CONTACT NAME	<ul> <li>Contact name of organization.</li> </ul>
• ALTERNATE CONTACT NAME	<ul> <li>Enter in an alternate contact name for emergencies.</li> </ul>
• PERMITTEE SIGNATURE	<ul> <li>The Permittee signs name or types it in.</li> </ul>
o DATE	<ul> <li>Enter in the date you are submitting application form.</li> </ul>
• EMAIL APPLICATION	<ul> <li>Email application to KBSHP.VESSEL.SUP@hawaii.gov</li> </ul>

\*\*Please note that application(s) are processed in the order in which they are received. If an application is returned to the sender for missing required information, it will then be processed in the order that it is returned corrected back to the office.