



**Legacy Land
Conservation Program**

Hawai'i Department of Land and Natural Resources

Form 6

**2017-2018 Agency Consultation and Request for Advice:
Information from Debt Service Grant Applicant**

Applicant: _____

Application Title: _____

Point of Contact: _____

Postal Address: _____

Email Address: _____

Phone: _____

Fax: _____

Identify the state financial instruments for debt service payment: _____

Identify the interests or rights in land having value as a resource to the State to which
the state financial instruments relate: _____

Location (maps and photos attached): _____

Island

District

Number of Parcels: _____

Total Acreage Conserved: _____

Tax Map Key Numbers: _____

Estimated total cost of the acquisition: _____

Amount requested from the Land Conservation Fund: _____

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Describe the location of the land, the characteristics of the land, and the key resources protected (see subsection 173-5(g), Hawai'i Revised Statutes):

Describe the public benefits of the land, including but not limited to where public access may be practicable or not practicable and why:

Describe the context and plan for long-term management of the land: