

DAVID Y. IGE  
GOVERNOR OF  
HAWAII



**STATE OF HAWAII**  
**DEPARTMENT OF LAND AND NATURAL RESOURCES**

STATE HISTORIC PRESERVATION DIVISION  
KAKUHIHEWA BUILDING  
601 KAMOKILA BLVD, STE 555  
KAPOLEI, HAWAII 96707

**SUZANNE D. CASE**  
CHAIRPERSON  
BOARD OF LAND AND NATURAL RESOURCES  
COMMISSION ON WATER RESOURCE  
MANAGEMENT

**ROBERT K. MASUDA**  
FIRST DEPUTY

**M. KALEO MANUEL**  
DEPUTY DIRECTOR - WATER

AQUATIC RESOURCES  
BOATING AND OCEAN RECREATION  
BUREAU OF CONVEYANCES  
COMMISSION ON WATER RESOURCE  
MANAGEMENT  
CONSERVATION AND COASTAL LANDS  
CONSERVATION AND RESOURCES ENFORCEMENT  
ENGINEERING  
FORESTRY AND WILDLIFE  
HISTORIC PRESERVATION  
KAHOOLAWE ISLAND RESERVE COMMISSION  
LAND  
STATE PARKS

**HRS 6E Submittal Filing Fees**

All submittals must have the appropriate filing fee in accordance with HAR §13-275-4 or HAR §13-284-4.  
All contact fields below must be complete and accurate.

Landowner: \_\_\_\_\_  
(if privately-owned historic property on Hawaii Register, HRS §6E-10)

Agency: \_\_\_\_\_

Contact Name: \_\_\_\_\_

Mailing Address: \_\_\_\_\_

Phone: \_\_\_\_\_ Email: \_\_\_\_\_

Title of Report/Plan: \_\_\_\_\_

Ahupua'a: \_\_\_\_\_ District: \_\_\_\_\_ Island: \_\_\_\_\_

TMK(s): \_\_\_\_\_

Contract Firm: \_\_\_\_\_  
(firm who completed the work on behalf of the agency)

Contact Name: \_\_\_\_\_

Phone: \_\_\_\_\_ Email: \_\_\_\_\_

- \_\_\_\_\_ Check if Report/Plan is a re-submittal (no fee)
- \_\_\_\_\_ Check if Field Inspection Report requested by SHPD (no fee)
- \_\_\_\_\_ Check if **Final Report** (no fee)

- \_\_\_\_\_ \$0 Archaeological Monitoring Report, no resources reported
- \_\_\_\_\_ \$25 Archaeological Monitoring Plan
- \_\_\_\_\_ \$25 Burial Disinterment Report
- \_\_\_\_\_ \$25 Request from Agency for Determination Letter per HAR §13-275
- \_\_\_\_\_ \$50 Archaeological Assessment (AIS with negative findings)
- \_\_\_\_\_ \$50 Osteological Analysis Report
- \_\_\_\_\_ \$100 Archaeological Monitoring Report, resources reported
- \_\_\_\_\_ \$150 Archaeological Inventory Survey Plan, Archaeological Data Recovery Plan, or Preservation Plan
- \_\_\_\_\_ \$250 Burial Treatment Plan (BTP)
- \_\_\_\_\_ \$450 Archaeological, Architectural, or Ethnographic Survey Report
- \_\_\_\_\_ \$450 Archaeological Data Recovery Report
- \_\_\_\_\_ Fee Total: Make check payable to "Hawaii Historic Preservation Special Fund"

For Office Use Only:

Date Received:	Payment Method:	
	Cash	Amount \$
Log No.:	Check No.	Amount \$
Receipt Issued:	Money Order	Amount \$