

STATE OF HAWAII DEPARTMENT OF HEALTH WASTERWATER BRANCH
RECYCLED WATER APPLICATION FORM: CONSTRUCTION EXTENSION

A. APPLICANT INFORMATION

Name:	Street, City & Zip Code:
Title:	Phone Number:
Company:	Email Address:

B. PROJECT INFORMATION

Project:	File number :
Site Description or Address:	

C. CONSTRUCTION EXTENSION

Revised estimated start date:

Reason for Extension:

D. DESCRIBE CHANGES TO ORIGINAL APPLICATION. Attach relevant documents.

E. APPLICATION PREPARER:

Name:	Street, City & Zip Code:
Title:	Phone Number:
Company:	Email Address:
Signature & Date:	

F. APPLICATION SUBMITTAL

1. Submit application form via mail, email or both.
2. Submit electronic file of construction plans, as well as a hard copy. Include information per section M of *Vol II: Recycled Water Projects*.
3. Mail to: Wastewater Branch, 919 Ala Moana Blvd. #309, Honolulu, HI 96814
Email: april.matsumura@doh.hawaii.gov