

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:

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Reason for Extension:

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**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: State Of Hawaii, Waste Water Branch, 2827 Waimano Home Road #207, Pearl City, HI 96782  
Email: [april.matsumura@doh.hawaii.gov](mailto:april.matsumura@doh.hawaii.gov)