

Director  
Department of Planning and Permitting  
City and County of Honolulu  
650 South King Street, HMB, 7th Floor  
Honolulu, Hawaii 96813

Dear Madam/Sir:

Subject: **Application for a New/Existing/Temporary Private Storm Drain Connection(s) to the City and County Separate Storm Sewer System**

Pursuant to Section 14-12.12, Revised Ordinance of Honolulu 1990, as amended (ROH), applicant hereby requests a license for a private storm drain connection(s) to the City and County separate storm sewer system. The \$100.00 license fee payable to City and County of Honolulu is enclosed.

**I. Project Information:**

Project Title: \_\_\_\_\_

Street Address: \_\_\_\_\_

Tax Map Key: \_\_\_\_\_ Total Area: \_\_\_\_\_

**II. Brief Description of Connection(s) serving this property. For each connection, provide size, inflow type, flow rate, and location. (Attach 3 copies of the drainage plan showing the location of the drain connection(s).)**

**III. Pursuant to Section II – Storm Water Quality of the Rules Related to Storm Drainage Standard the follow is required:**

- A. For development/redevelopment projects with a total area of one acre and less than five acres, list permanent post construction Best Management Practices (BMP) including maintenance schedule. (Attach 2 copies of the permanent post construction BMP plan, if not shown on the drainage plan.)
  
- B. For nonresidential subdivision development/redevelopment projects with total area of 5 acres or more and residential subdivision development projects with total area of 10 acres or more, attach 2 copies of the Storm Water Quality Report.

**IV. The following information are related to activities that could affect the quality of storm water discharged from the property:**

- A. North American Industry Classification System (NAICS) Code. (List as many activities and codes as applicable, i.e. Private Household - 8141.) NAICS codes can be found at [www.census.gov/epcd/naics/framesrc.htm](http://www.census.gov/epcd/naics/framesrc.htm)
  
- B. Does your property/facility discharge runoff associated with "industrial activity"? If yes, submit analysis of a runoff sample performed by a laboratory acceptable by the City within one (1) year after the date of the connection Storm Water Quality Branch, Environmental Quality Control Division, Department of Environmental Services.
  
- C. Is your property/facility presently covered by a National Pollutant Discharge Elimination System (NPDES) permit? If yes, attach a copy of the NPDES permit including effluent limitation.

**V. Type of discharge and total estimated quantity or flow rate (CFS: cubic feet per second, GPD: gallons per day, etc.):**

- Storm Water Runoff, \_\_\_\_\_ CFS
- Roof Drain, \_\_\_\_\_ CFS
- Swimming Pool Drain, \_\_\_\_\_ gallons
- Ground Water Seepage, \_\_\_\_\_ CFS/GPD
- Non-Contact Cooling Water [Air Conditioning HVAC, once through Condenser Water, \_\_\_\_\_ CFS/GPM
- Uncontaminated Air Conditioning Cooling Tower Water, \_\_\_\_\_ CFS/GPM
- Landscape Irrigation Water, \_\_\_\_\_ CFS/GPD
- Unpolluted Process Water, \_\_\_\_\_ CFS/GPM
- Treated Process Effluent, \_\_\_\_\_ CFS/GPM
- Decorative Pool, \_\_\_\_\_ CFS/GPD
- Other \_\_\_\_\_

**VII. Construction Schedule for New Connection(s):**

Work will start \_\_\_\_\_  
Work will end \_\_\_\_\_

**VIII. Person to contact in the event the licensee is subject to enforcement action for any violations of the conditions of Section 14-12.12 of the ROH:**

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

Title: \_\_\_\_\_

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

Telephone Number: \_\_\_\_\_

Very truly yours,

\_\_\_\_\_  
Owner/Lessee (Signature)                      Date

\_\_\_\_\_  
Print Name

\_\_\_\_\_  
Title

\_\_\_\_\_  
Company

Attachments

Revised 5-05

SDD Project Reference: \_\_\_\_\_