BIENNIAL NOTICE TO RENEW - EXCHANGE AGENT

INSTRUCTIONS & INFORMATION

Access this form via website at: **hawaii.gov/dcca/pvl**

1. This form is to be used by an exchange agent for renewal of its time share exchange agent registration and is to be completed before December 31 of each odd-numbered year.

2. This application will not be acted upon by the Director unless every statement in the application is completed and the application is submitted in the manner specified in Section 16-106-4.2(e), Hawaii Administrative Rules ("HAR"), Time Sharing, and Section 514E-9.5, Hawaii Revised Statutes ("HRS"). This includes, but is not limited to submitting materials under numbered index tabs in the exact order as follows:
   A. Registration form.
   B. Copy of program materials with information required in Section 514E-9.5(a), HRS.
      (i) The manner in which the program is operated, the identity of the persons operating the program, and the affiliation between the persons operating the program and the developer;
      (ii) Whether membership, participation, or both, in the program are voluntary or mandatory;
      (iii) The costs or ranges of costs of membership and participation in the program as of a specified date, not more than one year before the disclosure statement is delivered to the purchaser, and the person to whom those costs are payable;
      (iv) Whether and how any of the costs specified in paragraph (iii) may be altered, which costs are to be fixed on a case-by-case basis, and the manner in which they are to be fixed in each case;
      (v) A description of the availability of time share units represented to be participating in the exchange program; and
      (vi) The reservation and confirmation or other procedures to effectuate the exchange of occupancy rights.
   C. Service of process.
   D. Certificate of good standing.
   E. Fee.

3. The Director will act upon this application within 60 days after receipt of a complete application.

4. Please attach payment in the amount of $164 (*$122 renewal, $42 Compliance Resolution Fund*) in the form of a check made payable to: "***DEPARTMENT OF COMMERCE AND CONSUMER AFFAIRS***". (check must be in U.S. dollars and be from a U.S. financial institution.)

   The applicant's registration may be placed on inactive status upon payment of the above fee; provided that the applicant renews such registration biennially on or before December 31 of each odd-numbered year.

5. Failure, neglect or refusal of the applicant to pay the above-prescribed fee and submit the documents specified in Section 16-106-4.2, HAR, shall constitute a forfeiture of the applicant's registration. Any registration which has been forfeited may be restored within 90 days upon written application and payment to the Department of the delinquent fees and a penalty fee of $400; provided that the registration meets all of the requirements for renewal specified in Section 16-106-4.2(e), HAR. The applicant shall not engage in any time share activities in connection with the forfeited registration until the registration has been restored.

6. Mail or deliver all required items to:

   Time Share Program
   Dept. of Commerce & Consumer Affairs
   335 Merchant Street, Room 329, P.O. Box 3469
   Honolulu, HI 96801

7. Time share exchange agents should study and become familiar with HRS Chapters 436B and 514E, and HAR Chapters 53 and 106. These may be found on the Department's website at: **hawaii.gov/dcca/pvl**.

APPLICATION FOR RENEWAL OF REGISTRATION OF TIME SHARE EXCHANGE AGENT

FOR OFFICE USE	Forfeited _____ Restored _____

1. Name of applicant: _____

2. Address: _____

3. Status of registration: ◯ active ◯ inactive Reg. No.: _____

4. Applicant is: ◯ individual ◯ corporation ◯ limited liability company
◯ partnership ◯ joint venture ◯ limited liability partnership

Name of officers/partners/members/managers	Title	Address

5. Responsible managing employee:

_____
Name

_____ _____
Mailing Address (include suite no., city, state and zip code) Phone No.

6. Applicant's Attorney:

_____
Name

_____ _____
Mailing Address (include suite no., city, state and zip code) Phone No.

(CONTINUED ON PAGE 2)

Renewal.....	627.....	$122
CRF.....	621.....	$42
Penalty.....	631.....	$400

Print Name of Applicant: _____ Date: _____

7. Time share property (properties) or plans(s):

   a. Name: _____

   b. Location: _____

   c. Developer: _____
   Name

   _____ _____
   Mailing Address (include suite no., city, state and zip code) Phone No.

   (Attach separate sheet if necessary)

8. Person to receive service of process:

_____
Name

_____ _____
Mailing Address (include suite no., city, state and zip code) Phone No.

9. The following questions apply to the applicant and/or its partners, officers, directors, members, managers, real estate broker (if applicable), and RME(s):

   a. Have you ever been convicted of a crime in any jurisdiction that has not been annulled or expunged? ◯ YES ◯ NO

   b. Has any license ever been suspended, revoked or otherwise subject to disciplinary action? . . . . . ◯ YES ◯ NO

   c. Are there any disciplinary actions presently pending against you? . . . . . ◯ YES ◯ NO

   For any "YES" response, provide information of the date, place, and type of conviction or disciplinary action on a separate sheet.

I certify that the above information and statements are true and correct.

Date: _____ _____
Signature of Applicant

_____
Print Name and Title

Print Form

This material can be made available for individuals with special needs. Please call the Time Share Administrator at (808) 586-2709 to submit your request.