

DEVELOPER
APPLICATION FOR ISSUANCE OF
TIME SHARE LIMITED PERMIT

Sale to Current Owners of Other
Time Share Plans

FOR OFFICE USE

Received: _____
Accepted: _____
Permit No. _____

1. Time share plan

a. Name: _____

b. Location: _____
(Include mailing address)

Is the plan a multiple location time share plan? ☐ YES ☐ NO

If "YES", name the states in which the plan's properties are located. _____

Are any properties located outside of the United States? ☐ YES ☐ NO

The time share plan is registered in the states where the time share properties are located. ☐ YES ☐ NO

If the time share plan is not required to be registered in the states where the time share properties are located, the time share plan is in compliance with the applicable laws of those states ☐ YES ☐ NO ☐ N/A

2. Name of Applicant: _____

Address: _____ Phone No: _____

Applicant is: ☐ individual ☐ corporation ☐ limited liability company (LLC)
☐ partnership ☐ joint venture ☐ limited liability partnership (LLP)

Registered with the State Business Registration Division as of: _____

<u>Name of officers/partners/members/managers</u>	<u>Title</u>	<u>Address</u>
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

(CONTINUED ON PAGE 2)

Name of Applicant: _____ Date: _____

3. Responsible managing employee: _____
Name

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

4. ☐ Applicant has a time share plan currently registered in the State
Name of time share plan: _____ TD #: _____
Date registered: _____ Date last amended: _____
Attach a separate sheet if more than one time share plan is registered in the State

☐ Applicant is an affiliate of a developer that has a time share plan currently registered in the State
Name of affiliate developer: _____
Address: _____ Phone: _____
Name of time share plan: _____ TD #: _____
Date registered: _____ Date last amended: _____
Attach a separate sheet if more than one time share plan is registered in the State

5. Plan Manager: _____
Name

Mailing Address (include suite no., city, state & zip code)

6. Applicant's attorney: _____
Name

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

7. Escrow account currently maintained at: _____
Name

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

Account No. Date Established _____

(CONTINUED ON PAGE 3)

Name of Applicant: _____

Date: _____

8. The following questions apply to the applicant and its officers, directors, partners, members, managers, real estate broker (if applicable), and RME(s):
- a. If you have a time share plan currently registered in the State, in the past two years, have you been convicted of any crime, felony, or misdemeanor (*excluding traffic violations*), which has not been annulled or expunged, in this State or in any other state? ☐ YES ☐ NO ☐ N/A
If "YES", in what state(s) _____ and briefly describe on a separate sheet.
- b. If you do not have a time share plan currently registered in the State but are affiliated with a developer that has a time share plan currently registered in the State, in the past twenty years, have you been convicted of any crime, felony, or misdemeanor (*excluding traffic violations*), which has not been annulled or expunged, in this State or in any other state? ☐ YES ☐ NO ☐ N/A
If "YES", in what state(s) _____ and briefly describe on a separate sheet.
- c. Was any license, in this State or any other state, suspended or revoked at any time? ☐ YES ☐ NO
If "YES", in what state(s) _____ and briefly describe on a separate sheet.
- d. Is there any administrative action pending against you in this State or any other state? ☐ YES ☐ NO
If "YES", in what state(s) _____ and briefly describe on a separate sheet.
- e. Was any application for license denied in this State or any other state? ☐ YES ☐ NO
If "YES", in what state(s) _____ and briefly describe on a separate sheet.
- f. Have any complaints or charges ever been filed against you, regardless of outcome, in this State or any other state? ☐ YES ☐ NO
If "YES", in what state(s) _____ and briefly describe on a separate sheet.
- g. Have you ever filed for bankruptcy? ☐ YES ☐ NO
If "YES", in what state(s) _____ and briefly describe on a separate sheet.

I hereby certify that the statements and answers on this application are true and correct. I understand that any misrepresentation shall constitute grounds for refusal or subsequent revocation of permit. (Section 710-1017, Hawaii Revised Statutes).

Date

Signature of Applicant

Phone

Print Name and Title

Address

(CONTINUED ON PAGE 4)

**DEVELOPER APPLICATION FOR ISSUANCE OF
TIME SHARE LIMITED PERMIT
(Sale to Current Owners of Other Time Share Plans)**

INSTRUCTIONS & INFORMATION

1. This form is to be used by a developer for issuance of a time share limited permit.
2. The Director will not receive this application unless the applicant has completed every statement in the application.
3. The Director will act upon this application within 10 days after receipt of a complete application.
4. If the applicant is a corporation, partnership, joint venture, limited liability company (LLC), or limited liability partnership (LLP), the applicant must designate a responsible managing employee (RME).
5. Please attach the following payment:

\$1,000 Application Fee (non-refundable)

The above-prescribed fee shall be paid 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.)

6. Mail or deliver all required items to:

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

Pursuant to HRS §436B-9 your application shall be considered abandoned and shall be destroyed if you fail to provide evidence of continued efforts to complete the licensing process for two consecutive years. The failure to provide evidence of continued efforts includes but is not limited to: (1) failure to submit any required information and documents requested by the licensing authority within two consecutive years from the last date the documents and information were requested, or (2) failure to complete any additional requirements for licensure that remain after the approval of your application, such as attempting to complete an exam requirement, within two consecutive years from the date your application was approved, or (3) failure to provide the licensing authority with any written communication during two consecutive years indicating that you are attempting to complete the licensing process. If an application is deemed abandoned, the applicant shall be required to reapply for licensure and comply with the licensing requirements in effect at the time of the reapplication.

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.