FINAL SUBDIVISION REGISTRATION (AFTER PRELIMINARY ORDER OF REGISTRATION IS ISSUED) INSTRUCTIONS & INFORMATION

- 1. Pursuant to Hawaii Revised Statutes ("HRS"), §484-8.6, if a preliminary order of registration is obtained first, then upon the issuance of final order of subdivision approval of the subdivision by the county, the subdivider shall submit an application for final order of registration.
- 2. This form is to be used by a subdivider for issuance of a final order of registration pursuant to HRS §484-8.6.
- 3. Two (2) complete sets of the application must be submitted.
- 4. Blacklined and clean copies of all documents and information previously filed that have been amended must be submitted with the application.
- 5. Please attach the following fees:

Application Fee \$ 100 Consultant Fee \$2,000

Additional sums may be required if the cost of the consultant review exceeds the initial deposit. All funds in excess of the final cost of such review will be refunded to the subdivider.

The above-prescribed fees shall be paid in the form of a <u>check</u> 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 all required items to:	Deliver to office:	
	Subdivision Program	Subdivision Program	
	Department of Commerce & Consumer Affairs	Department of Commerce & Consumer Affairs	
	P.O. Box 3469	335 Merchant Street, Rm. 329	
	Honolulu, HI 96801	Honolulu, HI 96813	

7. 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 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.

(CONTINUED ON NEXT PAGE)

			Received:		
DEPARTMENT OF COMMERCE AND		USE	File No.:		
State of Hawaii	İ		Registered:		
		OFFICE			
APPLICATION FOR I SUBDIVISION REGIST					
(Preliminary Order of Registration		FOR			
(Teliminary Order of Registration	i i leviousiy issueu)				
1. Subdivision Name:			Reg. No.: S -		
Date of Preliminary Order of Registration:					
2. Name of Applicant (Subdivider):					
a. Applicant is: Individual Ipartnership Icorporation Ijoint venture					
□ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □	ompany (LLC) Ilimited	liabi	ility partnership (LLP)		
	inda):				
b. Address (Street, City, State and Zip Co	oue).				
c. Phone No.:					
3. Attach a list of revised documents being submitted for review.					
TAB 1 - Approved Final Subdivision Map					
TAB 2 - Letter of Final Subdivision Approval from the County					
TAB 3 - Public Offering Statement (b		onc)			
	5				
Other - Clean and blacklined copies of all documents and information required under HRS §484-5(a) that have been					
amended (separately tabbec	1)				
🗂 I hereby certify that all other information and documents previously submitted with the Application for Subdivision					
Registration (Preliminary Order of Re					
I hereby certify that the statements answers	and representations made	in t	his application and in the documents attached are		
			fusal to grant or subsequent revocation of registration		
and is a felony (Section 436B-19, 484-13 and	484-15, Hawaii Revised Sta	tute	s).		
I further certify that I have read and will abid	e by the provisions of Char	oter 4	484, Hawaii Revised Statutes and Chapter 104, Hawaii		
Administrative Rules.			- , · · · · · · · · · · · · · · · · · ·		
	D. <i>r</i>				
Date	Зу		(Signature of Subdivider)		
	_				
E	Зу	(Siar	nature of Authorized Officer or Agent)		
		(Sigi			
			(Print Name and Title)		

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.