Outfall I.D. No.: Rte.	M.P.	NPDES File No.	
(for office use)	(NPDES)	(DOH)	

## APPLICATION FOR A PRIVATE STORM DRAIN CONNECTION AND/OR DISCHARGE PERMIT TO THE STATE OF HAWAII HIGHWAYS DIVISION STORM DRAIN SYSTEM

		Application Date	, 20
conn		as amended, applicant hereby requests a permit for a waii Highways Division Storm Drainage System. To s as follows:	
1.	Name of Highway/Route No.:		
2.	Tax Map Key:		
3.	Location:		
4.	Check type of permit being applied for:		
	[ ] Connection	[ ] Discharge	

1. Brief description of connection(s) and/or discharge serving this property. (For each connection, provide size, type of discharge, flow rate and Drainage Report.)

2.	Does your property/facility generate storm water associated with "industrial activity"? If so, submit analysis of a storm water sample performed by a laboratory acceptable to the State within one (1) year after the date of the connection.			
3.	Does your property/facility associated with the drain connection require National Pollutant Discharge Elimination System (NPDES) permit/permit coverage? If so, attach a copy of the NPDES permit/permit coverage.			
4.	If your property/facility requires an NPDES permit coverage, install permanent best management practices (BMPs) and provide written documents for future maintenance of the permanent BMPs. If permanent BMPs are not included, subm specific documentation demonstrating that they are not practical.			
CONT	ACT PERSON:			
Name:				
Title:				
Compa	ny Name:			
Compa	ny Address:			
City, S	tate, Zip Code:			
Teleph	one Number:			
Fax Nu	Fax Number:			