

**STATE OF HAWAII
DEPARTMENT OF HAWAIIAN HOME LANDS
INFORMATION CHANGE NOTIFICATION FORM
HHL Form 00061 (rev 6/2008)**

Please print in black point pen

PLEASE CHECK WHERE APPROPRIATE.		Lease No.(s): _____
Please make changes to my:		Homestead Area: _____
<input type="checkbox"/> Mailing address Date effective: _____	<input type="checkbox"/> *Name (must produce necessary documents) Date effective: _____	<input type="checkbox"/> **Social Security No. Date effective: _____
*Submit Marriage Certificate, Name Change Decree or Divorce Decree		
**Submit Photocopy of ID		
My current homestead status with DHHL is: <input type="checkbox"/> Applicant <input type="checkbox"/> Lessee <input type="checkbox"/> Applicant & Lessee		

OLD INFORMATION				
<i>The following information must be completed.</i>				
Social Security No.:	_____	Day Phone No.:	_____	
Name:	_____	_____	_____	
	<i>Last Name</i>	<i>First Name</i>	<i>MI</i>	
Mailing Address:	_____	_____	_____	_____
	<i>P.O. Box / Street</i>	<i>Apt. No.</i>	<i>City</i>	<i>State</i>
				<i>Zip code</i>

NEW INFORMATION				
<i>Please fill out only information that needs to be changed.</i>				
Social Security No.:	_____			
Please select daytime contact number:				
<input type="checkbox"/> Home:	_____	<input type="checkbox"/> Bus.:	_____	<input type="checkbox"/> Cell: _____
Name:	_____	_____	_____	
	<i>Last Name</i>	<i>First Name</i>	<i>MI</i>	
Mailing Address:	_____	_____	_____	_____
	<i>P.O. Box / Street</i>	<i>Apt. No.</i>	<i>City</i>	<i>State</i>
				<i>Zip code</i>

Applicant/Lessee signs: _____
Signature *Date*

Staff acknowledges: _____
Signature *Date*

Remarks: _____

<u>Oahu, call for Department's Delivery Address or Mail Original Form to:</u>		<u>Telephone No.</u>
DHHL, Homestead Services Division, P. O. Box 1879, Honolulu, HI 96805	Application Branch:	620-9220
	Oahu Distr. Office:	620-9250
<u>Neighbor Islands, call for Department's Delivery Address or Mail Original Form to:</u>		
DHHL, East Hawaii District Office, 160 Baker Ave., Hilo, HI 96720		974-4250
DHHL, Kauai District Office, 3060 Eiwa St., Rm. 203, Lihue, HI 96766-1886		274-3131
DHHL, Maui District Office, 655 Kaunualii St., Suite 1, Wailuku, HI 96793		760-5120
DHHL, Molokai District Office, P.O. Box 2009, Kaunakakai, HI 96748		560-6104
DHHL, West Hawaii District Office, P.O. Box 125, Kamuela, HI 96743		887-6053