

2018 Renewal Notice of Intent Form

version 1.5

(Submission #: HNH-9E1H-82E9N, version 1) < < This submission is currently locked and cannot be revised.

PRINTED ON 3/8/2019

Summary

Submission #:	HNH-9E1H-82E9N	Date Submitted:	10/11/2018 2:48 PM
Form:	2018 Renewal Notice of Intent Form	Status:	On Hold
Submitted By:	Al Jerome Leano	Submission Creator:	Al Jerome Leano
Active Steps:	NGPC Issued		
Reference #:	HIR10F649		
Description:	2018 Renewal Notice of Intent Form		

Notes

Details

1. Renewal Information

Provide your current NGPC file number (e.g. HIR10E951, HI16LE231, HI12LD380). Your NGPC file number is located in the subject line of your NGPC. Do not put a space after HI.

HIR0F649

Provide the project or facility name that is on the subject line of your NGPC. For example: Construction of ABC Building Project.

Hoolehua Veterans and Homestead Resident's Center

By submitting this form you are certifying that:

You are currently complying with your NGPC requirements, including notifying DOH-CWB of all non-compliance via the e-Permitting CWB Compliance Submittal Form for Individual NPDES Permits and NGPCs.

2. Owner Information

Owner Legal Name Identified on Your Current NGPC

State of Hawaii

Owner Department

Department of Hawaiian Home Lands

Owner Division

Land Development Division

Owner Mailing Address

91-5420 Kapolei Parkway
Kapolei, Hawaii 96707

Owner Type

Municipal - City, County, or State Government Project

Signatory Type

The person certifying this NOI must meet one of the following descriptions and be employed by the Owner. Please identify your appropriate signatory type based on the items listed below.

State Agency: I certify that for a state agency, I am a principal executive officer or ranking elected official.

Municipal Agency: I certify that for a municipal agency, I am a principal executive officer or ranking elected official.

Non-Federal Public Agency: I certify that for a non-federal public agency, I am a principal executive officer or ranking elected official.

Federal Agency: I certify that for a federal agency, I am the chief executive officer of the agency, or I am the senior executive officer having responsibility for the overall operations of a principal geographic unit of the agency.

Partnership: I certify that I am a general partner for a partnership.

Proprietorship: I certify that I am the proprietor for a sole proprietorship.

Corporation Officer: I certify that for a corporation, I am the President, Vice President, Secretary, or Treasurer of the corporation and in charge of a principal business function, or I perform similar policy or decision-making functions for the corporation.

Corporation Manager: I certify that for a corporation, I am the Manager of one or more manufacturing, production, or operating facilities and am authorized to make management decisions which govern the operation of the regulated facility or facilities including having the explicit or implicit duty of making major capital investment recommendations, and initiating and directing other comprehensive measures to assure long term environmental compliance with environmental laws and regulations. I can ensure that the necessary systems are established or actions taken to gather complete and accurate information for permit application requirements and authority to sign documents has been assigned or delegated to me in accordance with corporate procedures.

Trust: I certify that for a trust, I am a trustee.

LLC: I certify that for a limited liability company (LLC), I am the Manager or a Member authorized to make management decisions for the LLC and am in charge of a principal business function, or I perform similar policy or decisionmaking functions for the LLC.

Please Select the Signatory Type based on the above descriptions.

State Agency

Certifying Person Salutation

Ms.

Certifying Person First Name

Jobie

Certifying Person Last Name

Masagatani

Certifying Person Title

Chair

Certifying Person Email Address

jobie.k.masagatani@hawaii.gov

Certifying Person Phone Number (e.g., 555-555-5555)

808-620-9529

3. Authorized Representative

Authorization

The Certifying Person hereby authorizes the named individual or any individual occupying the named position of the company/organization listed below to act as our representative to submit information/documents necessary to complete the NOI to discharge to State waters from the subject facility. Our representative is further authorized to submit information/documents for compliance with the NPDES general permit conditions, except submittal of the Notice of Cessation (NOC). The Owner hereby agrees to comply with and be responsible for all NPDES general permit conditions. This authorization begins with NOI processing and ends upon receipt of the NOC by the CWB. The Owner authorizes the duly authorized representative to submit additional information/documents necessary to complete the NOI and to submit information/documents to comply with the NPDES general permit conditions. The Owner is responsible for all information/documents submitted by the duly authorized representative for completion of the NOI and for compliance with the NPDES general permit conditions. The Certifying Person is required to sign the NOC for the project. After receipt of the NOC for the project, the duly authorized representative is no longer recognized by the CWB. The responsibility of the authorized representative cannot be delegated to an outside consultant with no financial responsibility for the company - they cannot sign as the "authorized representative" on behalf of the Owner. This requirement stems from the fact that self-reporting is critical under the Clean Water Act and Hawaii Water Pollution statutes; reports filed with CWB can have serious legal consequences, including possible civil and even criminal liability. The Owner in signing reports, therefore, must be represented by someone who has some responsibility for the corporation's financial interests. The Certifying Person attests that the authorized representative 1) meets the requirements of HAR 11-55-07(b); and 2) has financial responsibility within the corporation/organization who can attest to the accuracy of reports either because he or she participated in the preparation of the report, or supervises those who did prepare it and can attest that those individuals followed standard protocols that ensure the accuracy of the report. Both the Certifying Person and authorized representative understand that they can be subject to civil and criminal liability for non-compliance with NPDES general permit conditions, non-compliance with HAR Chapters 11-54 and 11-55, and for falsifying information.

Authorized Representative Contact Information

Complete the following for your Authorized Representative.

Authorized Representative Company/Organization Name

NONE PROVIDED

Authorized Representative Department

NONE PROVIDED

Authorized Representative Division

NONE PROVIDED

Authorized Representative Mailing Address

NONE PROVIDED

Authorized Representative First Name

NONE PROVIDED

Authorized Representative Salutation

NONE PROVIDED

Authorized Representative Last Name

NONE PROVIDED

Authorized Representative Email Address

NONE PROVIDED

Authorized Representative Phone (e.g., 555-555-5555)

Attachments

Date	Attachment Name	Context	Confidential?
None			

Status History

Date	User	Processing Status
10/3/2018 10:39:58 AM	Al Jerome Leano	Draft

Date	User	Processing Status
10/11/2018 2:48:42 PM	Al Jerome Leano	Submitted
11/9/2018 2:22:39 PM	Michael Hayato Kaneshiro	On Hold

Processing Steps

Step Name	Assigned To/Completed By	Date Completed
Submit Form via ePermitting. Mail or Deliver Completed Hard Copy to DOH-CWB to Begin Processing.	Al Jerome Leano	10/11/2018 02:48 PM
Hard Copy Signature Received	Michael Hayato Kaneshiro	11/09/2018 02:22 PM
NGPC Issued		
Administrative Extension Granted.	Michael Hayato Kaneshiro	11/09/2018 02:22 PM
Wait for Readoption of General Permit		