

Department of Hawaiian Home Lands  
Attn: LDD - Housing Project Branch  
91-5420 Kapolei Parkway  
Kapolei, Hawaii 96707



**Response Form**

**Maui Residential Project Lease Offer  
Offer Application: OFA- XXXXX**

TO DETERMINE THE INTEREST IN THIS OFFERING PLEASE RETURN THIS RESPONSE FORM TO THE  
DEPARTMENT BY 10/03/2025

**YOU MAY SUBMIT YOUR RESPONSE ONLINE AT <https://dhhl.my.site.com/s/online-response-form>**

You may scan the QR code on this form to access the online response form

Please indicate your preference(s) below, sign and date the form, and return it to the department or ensure it is postmarked by 10/03/2025. If we do not receive your completed response form, it may be assumed that you are not interested in the Maui Residential Project Lease Offer, and you may be deferred from this offering.

\_\_\_\_\_ I am **INTERESTED** in the Project Lease Offer Maui Residential Project Lease Offer

Please rank your preferences for the following project areas. Assign a ranking from 1 to 4 , with 1 being your top choice and 4 being your least preferred option:

Kamalani \_\_\_\_\_ Lealii IB \_\_\_\_\_ Waiehu Mauka \_\_\_\_\_

Wailuku SF \_\_\_\_\_

\_\_\_\_\_ I am **NOT INTERESTED** in any of the offered projects.

Please DEFER my application for this offering but contact me for future offerings. **I UNDERSTAND THAT MY APPLICATION WILL NOT GO TO THE BOTTOM OF THE LIST.** I choose to defer from this offering for the following reason(s):

\_\_\_\_\_ Location \_\_\_\_\_

\_\_\_\_\_ Other. Please Explain: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_  
Applicant's Name

\_\_\_\_\_  
Signature of Applicant

\_\_\_\_\_  
Date

\_\_\_\_\_  
Mailing Address

\_\_\_\_\_  
Social Security Number (last 4 digits)

\_\_\_\_\_  
City

\_\_\_\_\_  
State

\_\_\_\_\_  
Zip Code

\_\_\_\_\_  
Res. Phone No.

\_\_\_\_\_  
Bus. Phone No.

\_\_\_\_\_  
Email Address

\_\_\_\_\_  
Cell Phone No.

FOR OFFICIAL USE ONLY	
ODD/APPLICATIONS	HOUSING PROJECT BRANCH
NAME _____ ADDRESS _____ PHONE _____	
OTHER _____	
COMPUTER INPUT DATE _____	DATE _____
STAFF'S INITIALS _____	STAFF INTL _____