BERNARD P. CARVALHO JR.

GARY K. HEU ADMINISTRATIVE ASSISTANT



IMAIKALANI P. AIU DEPUTY DIRECTOR OF PLANNING

IAN K. COSTA

COUNTY OF KAUA'I

PLANNING DEPARTMENT 4444 RICE STREET KAPULE BUILDING, SUITE A473 LIHU'E, KAUA'I, HAWAI'I 96766-1326

TELEPHONE: (808) 241-6677 FAX: (808) 241-6699

580090530000 TVNC-1297-

TO: All Approved Non-Conforming use Certificate Holders

SUBJECT: Standards governing TVR usage

Your Non-Conforming Use Certificate application has been approved. The included copy of your application with the type of TVR usage you are approved initialed and dated will serve as your certificate.

The property and operation is subject to the applicable provisions of Section 8-17 of the Kaua'i County Code, in particular those provisions adopted by Ordinance 864. Any violations of these sections will be considered grounds to revoke the certificate.

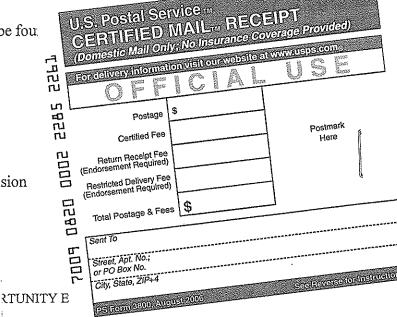
Please note that to keep your Non-Conforming Use certificate valid you must apply for renewal every year, including 2009, by July 31st and that in accordance with Ordinance 876 the Planning Commission will, by July 31st, promulgate rules to allow members of the public to contest the re-issuance of any nonconforming use permit based on complaints related to the loss of quiet enjoyment or transgressions of visitor industry standard 'rules of occupancy,' as well as non-compliance with all State and County land use or planning laws.

Further info and an application for renewal can be fou

Ian K. Costa

Planning Director

cc: Finance Department, Real Property Division



A Single Family Vacation Rental outside the VDA

In addition to General Info, Provide the following:

____Signed and Stamped As Built plot, floor, elevation and section drawings by a licensed architect or engineer showing the property as it exists today and showing registration and contact sign location.

Verification of operation prior to March 7th, 2008

To be initialed by Planning Dept. Staff

Applicant meets definition criteria per CZO

_____The subject
property is not within
the Visitor
Destination Area but
qualifies for and is
issued a Non-Conforming Use
Certificate on

A Single Family
Transient Vacation
Rental operating on a
property or dwelling
on the State or
National Historic
Register

Provide the following:
Use permit

approved by the Planning Commission or Director as applicable

To be initialed by Planning Dept. Staff

___ The subject property qualifies for the historic exemption and has a use permit for the operation

___ A Single Family Vacation Rental in the VDA

In addition to General Info, Provide the following:

Signed and Stamped As Built plot, floor, elevation and section drawings by a licensed architect or engineer showing the property as it exists today and showing registration and contact sign location.

To be initialed by Planning Dept. Staff

___ The subject property is within the Visitor Destination Area and so is allowed to operate transient vacation rentals in conformance with the standards of Section 8-17.8 of the Kaua'i County Code and the underlying zoning.

A lawful Multi-Family vacation rental

Provide the following:

___ Plans showing registration and contact sign location.

To be initialed by Planning Dept. Staff

The subject property is a lawful multi-family TVR and so is allowed to operate transient vacation rentals in conformance with the standards of Section 8-17.8 of the Kaua'i County Code and the underlying zoning.

____A single family vacation rental in the SLUD Ag district

In addition to General Info, Provide the following:

Signed and Stamped As Built plot, floor, elevation and section drawings by a licensed architect or engineer showing the property as it exists today and showing registration and contact sign location.

Verification of operation prior to March 7th, 2008

Verification structure built prior to June 4, 1976 or

_____Special Use permit issued on

To be initialed by Planning Dept. Staff

The subject property is within the State Land Use Ag district and has a Non-Conforming Use Certificate issued on

____The subject
property is within the
State Land Use Ag
district and has
applied for a Special
Permit under
application number

and is hereby issued a Provisional Non-Conforming Use Certificate which will expire upon decision of the above Special Permit.

To be initialed Planning Dept. Special Permit	Staff number was:
Denied on	on

The application will not be deemed complete and accepted until you have been notified in writing

Signature

Date

Owner/Applicant



Search Details

Taxpayer Name:	W BRUCE B. FARNSWORTH	
DBA Name:		
Taxpayer ID:	W40107436-01	
Former Taxpayer ID:	N/A	
Business Location:		
Tax Type:	General Excise and Use	
Tax Status:	Open	
Business Began:	01/01/2008	
	<-Back New Search->	

Last Updated on 09/21/2011

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NCU RENEWAL FORM

COUNTY OF KAUAI
PLANNING DEPARTMENT
4444 RICE STREET AUITE A473
LIHUE, HI 96766
808-241-4050

NON-CONFORMING USE CERTIFICATE #

PHONE NO.

APPLICANT I

New C Lesse Numbe

From

APPLICANT BRUCE + Elizabeth

For Government Use Only Ву Date Received Date Approve Fee \$150 Date /0 Famswort NOTE: *Lessee must have an unexpired and recorded lease of five (5) years or more from date of filing this application. Sign: Print: Authorized Agent - Attach Agetter of Authorization Proprietor of TVL borration PLANNING DEPT Property Info

Information Update

comple	provide updated information regarding the property te and provide attachments even if information has rishment name Huma Hull.	or operati not changed	on. Please
Descri	ption of Operation (no. of rooms, no. of units etc.)	2 Bed	room Homo
	COUNTY OF KAUAI PLANNING DEPARTMENT	Nº	51376
	(Official Receipt)	1-1	
	Lihue, Kauai, Hawaii,		
	1101 2010	(s 19D) DOLLARS
	Application No. TVNC (29)	A-	
		Planning his autho	



Search Details

Taxpayer Name:	W BRUCE B. FARNSWORTH
DBA Name:	
Taxpayer ID:	W40107436-01
Former Taxpayer ID:	N/A
Business Location:	
Тах Туре:	Transient Accommodations
Tax Status:	Open
Business Began:	01/01/2008
•	<-Back New Search->

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https://dotax.eha

NCU RENEWAL FORM

COUNTY OF KAUAI	
PLANNING DEPARTMENT	For Government Use Only
4444 RICE STREET AUITE A473 2009 LIHUE, HI 96766	Date Received 10/4/// By By Date Approved By
808-241-4050	Date Approved By 1/
	Fee \$150 # 1375 Date 10/7//
non-conforming use certificate # TVNC-129	CKITTU //
APPLICANT W. Brucet Elizabeth Farmou	NOTE: *Lessee must have an unexpired
ADDRESS 7316 alealea	and recorded lease of five (5) years
	or more from date of filing this
Haena Hi	application.
mail Pr Box 780 Hanali 96714	Sign:
PHONE NO.	Print:
	F. Se A. S. S. Se
APPLICANT ✓ Own	Authorized Agent - Attach Letter of
	Authorized Agent - Accach becter of
LeşI	Proprietor of TVR operation
Nun Fro	
Property I	nfo
	distribution of the second of
The Mark the South to AM I all the	8 - C p-13-11
Tax Map Key <u>\$8609053</u> 0000 Lot. No.	# of Buildings on CPR or Lot
Zoning: - SLUDGeneral Plan	County K-4
Information T	Jpdate
Please provide updated information regarding	the property or operation. Please
complete and provide attachments even if info	rmation has not changed.
Establishment name Haena Hall	
	·····
Description of Operation (no. of rooms, no. o	funits etc.) March Family
besegretion of operation (no. of rooms, no. of	whites etc.)
Mulli	
/ / //// 7 436 70/TAT Licens	se # <u>W 40107 436-01</u>
/ ///// 7/36 TO/TAT Licens	se # <u>W 40107 436-0/</u>
COUNTY OF	*
	KAUAI ARTMENT
COUNTY OF PLANNING DEP	KAUAI ARTMENT Nº 51375
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COUNTY OF PLANNING DEP (Official Rec	KAUAI ARTMENT Nº 51375 eipt)

Planning Director or his authorized agent

COUNTY OF KAUAI PLANNING DEPARTMENT Inspections

To be initialed by Planning	Dept. Staff
The subject property has	s no violations
The subject property was	s inspected on
The property has the fol	llowing violations
To be initialed by Planning De The Non conforming Use C	
	Pertificate is renewed on for a
	ation Rental outside the VDA
	ation rental in the SLUD Ag district
	nsient Vacation Rental operating on a property or National Historic Register
^	
Signature Elyslyth fa	MSWFA Date 9-30-2011
Owner Applicant	



Search Details

Taxpayer Name:	W BRUCE B. FARNSWORTH	
DBA Name:		
Taxpayer ID:	W40107436-01	
Former Taxpayer ID:	N/A	
Business Location:		
Tax Type:	Transient Accommodations	
Tax Status:	Open	
Business Began:	01/01/2008	
•	<- <u>Back New Search</u> ->	

Last Updated on 09/28/2011

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TVR REGISTRATION AND NCU FORM COUNTY OF KAUAI For Governme FINANCE DEPARTMENT REAL PROPERTY DIVISION 808-241-6222 Registration # PLANNING DEPARTMENT 808-241-6677 Date Received_(tarnsworth Gruce + L Date Approved_ Plans By Fee \$ Date 96714 NOTE: *Lessee must have an unexpired PHONE NO. and recorded lease of five (5) years or more from date of filing this APPLICANT IS: application. Owner of P Lessee of Sign: Leased Authorized Print: Authorizat Proprietor Info # of Buildings on CPR or Lot Lot. No. ___General Plan Zoning - SLUD Establishment Info Establishment name and Address Halma G.E. License # W40107436-01 TAT License # W40107 436

Establishment name and Address Halva Hale

Description of Operation (no. of rooms, no. of units etc.)

I WR.

G.E. License # W40107436-0/ TAT License # W40107436-0/

24 Hour Contact Info 808-826-9596

Date TVR Use Started 5-/0-2000

Copy of For the Safety and Comfort of You and Your Neighbors

Attachments provided (G.E.License, TAT License, Units in TVR Use etc.)

COUNTY OF KAUAI PLANNING DEPARTMENT Inspections

	d by Planning Der	ot. Staff	1 /	
The subject	ct property has n	o violations	1-/0	
The subject	ct property has no ct property was in cty has the follo	nspected on	>/5/07	
The prope	rty has the follo	wing violations	* .	
	·····	<u></u>		

To be initialed by Planning Dept. Staff

The subject property does not qualify for single family vacation rental uses.

1

8/27/08

A Single Family Vacation Rental outside the VDA

In addition to General Info, Provide the following:

Signed and Stamped As Built plot, floor, elevation and section drawings by a licensed architect or engineer showing the property as it exists today and showing registration and contact sign location.

Verification of operation prior to March 7th, 2008

To be initialed by

Plancing Dept. Staff
Applicant meets
definition criteria

per CZO property is not within the Visitor Destination Area but qualifies for and is issued a Non-Conforming Use Certificate on

A Single Family Transient Vacation Rental operating on a property or dwelling on the State or National Historic Register

Provide the following:

_Use permit approved by the Planning Commission or Director as applicable

To be initialed by Planning Dept. Staff

The subject property qualifies for the historic exemption and has a use permit for the operation

A Single Family Vacation Rental in the VDA

In addition to General Info, Provide the following:

Signed and Stamped As Built plot, floor, elevation and section drawings by a licensed architect or engineer showing the property as it exists today and showing registration and contact sign location.

To be initialed by Planning Dept. Staff

The subject property is within the Visitor Destination Area and so is allowed to operate transient vacation rentals in conformance with the standards of Section 8-17.8 of the Kaua'i County Code and the underlying zoning.

A lawful Multi-Family vacation rental

Provide the following:

Plans showing registration and contact sign location.

To be initialed by Planning Dept. Staff

The subject property is a lawful multi-family TVR and so is allowed to operate transient vacation rentals in conformance with the standards of Section 8-17.8 of the Kaua'i County Code and the underlying zoning.

A single family vacation rental in the SLUD Ag district

In addition to General Info, Provide the following:

Signed and Stamped As Built plot, floor, elevation and section drawings by a licensed architect or engineer showing the property as it exists today and showing registration and contact sign location.

Verification of operation prior to March 7^{tt}, 2008

Verification structure built prior to June 4, 1976 or

____ Special Use permit issued prior to March 7, 2008

To be initialed by Planning Dept. Staff

The subject property is within the State Land Use Ag district and has a Non-Conforming Use Certificate issued on

Eliabeth Famsion Date 10-13-08
Owner/Applicant Signature__