

NCU RENEWAL FORM

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

For Government Use Only
Date Received 6/8/12 By _____
Date Approved _____ By _____
Fee \$150 # 52074 Date 6/21/12
CK II 7691

NON-CONFORMING USE CERTIFICATE # TV-1001

APPLICANT A K DACHA

ADDRESS PO Box 555
Hanalei HI 96714

PHONE NO. _____

APPLICANT
 Own
 New
 Les
Num _____
Frc _____

NOTE: *Lessee must have an unexpired and recorded lease of five (5) years or more from date of filing this application.

Sign: [Signature]

COUNTY KAUAI

Authorized Agent - Attach Letter of Authorization. P2:06
Proprietor of TVR operation

PLANNING DEPT.

Property Info

Tax Map Key 5.8.9-41 Lot. No. 2 # of Buildings on CPR or Lot _____
Zoning: - SLUD R-4 General Plan _____ County Kauai

Information Update

Please provide updated information regarding the property or operation. Please complete and provide attachments even if information has not changed.
Establishment name Banana Beach House located at
7356 Alealea Rd, Wainiha.
Description of Operation (no. of rooms, no. of units etc.) _____
4 bd, 4.5 bath single family home
G.E. License # W82365392-1 TAT License # W82365392-1

COUNTY OF KAUAI
PLANNING DEPARTMENT

No 52074

(Official Receipt)

Lihue, Kauai, Hawaii, 6/21/12
Received from A K - DACHA, LLC

(\$ 150) DOLLARS

Deposit Covering NCA 2012

Application No. TV-1001 NCH

Check 150 Cash _____

[Signature]
Planning Director
or his authorized agent

COUNTY OF KAUAI PLANNING DEPARTMENT

Inspections

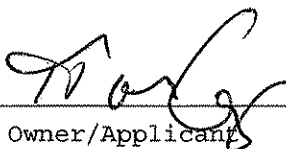
To be initialed by Planning Dept. Staff

- The subject property has no violations
- The subject property was inspected on _____
- The property has the following violations _____
- _____
- _____
- _____

To be initialed by Planning Dept. Staff

- The Non conforming Use Certificate is revoked
- The Non conforming Use Certificate is renewed on _____ for a
 - A Single Family Vacation Rental outside the VDA
 - A single family vacation rental in the SLUD Ag district
 - A Single Family Transient Vacation Rental operating on a property or dwelling on the State or National Historic Register

Signature



Owner/Applicant

Date

6/6/12

BERNARD P. CARVALHO JR.
MAYOR



COPY
IAN K. COSTA
DIRECTOR OF PLANNING

GARY K. HEU
ADMINISTRATIVE ASSISTANT

IMAIKALANI P. AIU
DEPUTY DIRECTOR OF PLANNING

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

TELEPHONE: (808) 241-4050 FAX: (808) 241-6699

July 23, 2010

Alex Lukianov
c/o Kauai Island Vacations
PO Box 1405
Hanalei HI 96714

SUBJECT: Non-Conforming Use Certificate Application # TV-1001-NCU
TMK: 5-8-009:041

We received your application for renewal on 6/30/10 and have processed your filing fee.

Please note that renewal are due annually as Section 8-17.10(g) of the Kaua'i County Code states,
"The owner or lessee who has obtained a nonconform apply to renew the nonconforming use certificate by July

Renewal applications should include proof of current C
are available on line.

Please call Deputy Director Imai Aiu or TVR Inspector questions.

Mahalo

Ian K. Costa
Planning Director

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OFFICIAL USE

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Return Receipt Fee (Endorsement Required)	
Restricted Delivery Fee (Endorsement Required)	
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Sent To
Street, Apt. No.,
or PO Box No.
City, State, ZIP+4

PS Form 3800, August 2006 See Reverse for Instructions

7008 3230 0002 4925 1267

TVR REGISTRATION AND NCU FORM

COUNTY OF KAUAI
FINANCE DEPARTMENT
REAL PROPERTY DIVISION 808-241-6222
PLANNING DEPARTMENT 808-241-6677

APPLICANT MATT HUNTER
ADDRESS P.O. BOX 1247
HANALEI, HI 96714

PHONE NO. _____
APPLICANT _____
Owner _____
Lessee _____
Leased _____
 Author _____
Author _____
Propri _____

For Government Use Only
Registration # TV-1001 NCU
Date Received 4/15/08 BY _____
Date Approved 8/28/08 BY NV
Plans By _____
Fee \$ _____ Date _____

NOTE: *Lessee must have an unexpired and recorded lease of five (5) years or more from date of filing this application.

Sign: _____
Print: _____

Property Info

Tax Map Key 5-B-9-41 Lot, No. Z # of Buildings on CPR or Lot _____
Zoning - SLUD R-4 General Plan _____ County Kauai

Establishment Info

Establishment name and Address BANANA BEACH HOUSE

7356 ALEALFA ROAD, WAHINIHA, HANALEI HI 96714
Description of Operation (no. of rooms, no. of units etc.) 4 bedrooms, 4 1/2 bath, 1 SFR dwelling

G.E. License # W82365392-01 TAT License # W82365392-01
24 Hour Contact Info HOLLY IAZO

Date TVR Use Started _____
 Copy of For the Safety and Comfort of You and Your Neighbors Attachments provided (G.E. License, TAT License, Units in TVR Use etc.)

SEE ATTACHED

COUNTY OF KAUAI PLANNING DEPARTMENT
INSPECTIONS

To be initialed by Planning Dept. Staff

The subject property has no violations
_____ The subject property was inspected on 3/27/09
_____ The property has the following violations _____

To be initialed by Planning Dept. Staff

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