



**APPLICATION FOR  
MARINE OCEAN WATER EVENT**  
Division of Boating and Ocean Recreation  
Department of Land and Natural Resources, State of Hawaii



**1. PERMIT INFORMATION**

Enter Event Date(s), Times and Location(s):

Date(s)	Start Time	End Time	Location(s)

**OFFICE USE ONLY**

Date Received:

Received By:

**2. PERSON IN CHARGE INFORMATION (Customer)**

Name (Last): \_\_\_\_\_ (First): \_\_\_\_\_ (M.I.): \_\_\_\_\_ Suffix: \_\_\_\_\_

Date of Birth:  /  /  Gender:  Female  Male

Where will the "Person in Charge" be during the event? \_\_\_\_\_

Phone (business):  (home):  Email: \_\_\_\_\_

Mailing Address: \_\_\_\_\_ Apt #:

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip:

**3. SPONSOR CONTACT INFORMATION**

Name (Last): \_\_\_\_\_ (First): \_\_\_\_\_ (M.I.): \_\_\_\_\_ Suffix: \_\_\_\_\_

Gender:  Female  Male

Phone (business):  (home):  Email: \_\_\_\_\_

Mailing Address: \_\_\_\_\_ Apt #:

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip:

**4. EVENT INFORMATION**

Name of Event: \_\_\_\_\_ Event Type:  Amateur  Professional

Number of Contestants:  Number of Vessels:  Maximum Size of Boats (feet):

Types of Vessels: \_\_\_\_\_

Number of Spectator Craft:  Number of Spectators:

Description of Event: \_\_\_\_\_

**You must submit a chart or scale drawing showing boundaries, courses, and markers contemplated for this event.**



## APPLICATION MARINE OCEAN WATER EVENT (Continued)

### 4. EVENT INFORMATION (Continued)

Will this event interfere or impede the natural flow of commercial traffic?  Yes.  No. If Yes, explain.  
 This may require Regatta Regulation (fill in the blank) Honolulu.

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What extra or unusual hazard will be introduced into the event area? (Possible hazards to participants or non-participants.)

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Have any objections been received from other interested parties?  Yes.  No. If Yes, explain.

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List Vessels or Equipment provided by sponsoring organizations for safety purposes, if any. Provide description and/or identification numbers.

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Does the sponsoring organization deem their patrol adequate for safety purposes?  Yes.  No. If Yes, explain.

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### 5. NOTICE TO ALL APPLICANTS

This application must be submitted at least 30 days prior to the event. Non-government sponsors are required to provide a certificate of insurance naming the State of Hawaii as an additional insuree. This may be submitted to the District Office at least 7 days prior to the event or by mail to the appropriate District Office.

If a Coast Guard or Coast Guard Auxiliary Patrol is requested for this event, you must contact the Commander of the U.S. Coast Guard to make arrangements at:

**Commander (OPCEN) USCG Group Honolulu, Sand Island Access Road, Honolulu, HI 96850. Phone: (808) 581-2450**

### 6. AGREEMENT & SIGNATURE

I agree to comply with the provisions of the Hawaii Administrative Rules as promulgated by the Division of Boating and Ocean Recreation applicable to this permit.

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

\_\_\_\_ / \_\_\_\_ / \_\_\_\_  
 Date