



DEPARTMENT OF WATER SUPPLY
COUNTY OF MAUI
200 South High Street, 5th Floor
Wailuku, Maui, Hawaii 96793-2155
www.mauiwater.org

Reservation No.: _____

RESERVATION OF AVAILABLE SERVICE CAPACITY

APPLICANT NAME: _____
(Property Owner)

CAPACITY: _____
(Number and Size of Meters)

SUBDIVISION/PROJECT NAME: _____

TMK: _____ SD NO. _____ LOT NO.: _____ BPA NO.: _____

LOCATION: _____

DEPOSIT AMOUNT: _____

The Applicant hereby requests a reservation of service capacity for the stated project, as the Applicant is not able to accept water service at this time. The reservation of service capacity is subject to the provisions of Maui County Code Section 14.07.090 – Payment of Water System Development Fee. The Applicant shall pay a deposit equal to the current Water System Development Fee in conjunction with this form. The Applicant shall pay the total Water System Development Fee in effect at the time the water meter is installed.

The Applicant understands and agrees that the reservation will expire five years from the date of the Director’s approval. The Department and the Applicant shall agree in writing on the amount of any reserved allocation.

The Applicant understands and agrees that all required water system improvements shall be installed and have passed final inspection prior to the reservation’s expiration date.

If within five years, the Applicant is not able to accept installation of water service (improvements have not been installed and passed final inspection), the application and the reservation of the allocation shall expire, the deposit paid by the Applicant shall be forfeited, and said deposit shall be applied to the water system development fee fund with no credit of any kind toward any future application.

ACKNOWLEDGEMENT:

The foregoing is understood and agreed to by the Applicant.

Applicant’s Signature: _____

Applicant’s Name (Print): _____

Phone Number: _____ Email Address: _____

Date: _____

CONTACT PERSON INFORMATION:

Name: _____ Zoning/Use: _____

Mailing Address: _____ Parcel Acreage: _____

Phone Number: _____ Email Address: _____

APPROVED:

Signature: _____

Director, DEPARTMENT OF WATER SUPPLY

Date of Reservation: _____

Expiration Date of Reservation: _____

(5 years from date of reservation with no extensions)

Return this form to:

Department of Water Supply, Engineering Division
200 South High Street, 5th Floor
Wailuku, HI 96793-2155

Please call Department of Water Supply, Engineering at (808) 270-7835 if you have any questions.