



**COUNTY OF MAUI**  
**DEPARTMENT OF PUBLIC WORKS • DEVELOPMENT SERVICES ADMINISTRATION**  
**110 ALA'HI ST., SUITE 214, KAHULUI, HAWAII 96732**  
**(808) 270-7250**

**APPLICATION FOR CERTIFICATE OF OCCUPANCY**

I. Certificate of Occupancy Information		Type or Print Legibly	
PROJECT NAME			
BUILDING NAME (COMMERCIAL PROJECTS ONLY)			
BUILDING ADDRESS			
For (check all that apply): <input type="checkbox"/> New Building <input type="checkbox"/> Addition/ Alteration/Re-Model/Repair <input type="checkbox"/> Existing <input type="checkbox"/> Plan Review Waiver Building Permit <input type="checkbox"/> Other <input type="checkbox"/> Miscellaneous Inspections Requested		TO BE OCCUPIED AS *see instructions UNIT #, OR DESCRIPTION OF AREA IN STRUCTURE      FLOOR AREA (SQ FT)	
II. Property Information			
TAX MAP KEY		PROPERTY ADDRESS	
PROPERTY OWNER			
OWNER ADDRESS			
III. Building Permit Information if applicable			
BUILDING PERMIT #	ISSUE DATE	FINAL INSPECTION DATE	CONTRACTOR
IV. Plan Review Waiver Building Permit information if applicable			
ARCHITECT/ ENGINEER			
V. Applicant Information			
Select One: <input type="checkbox"/> Property Owner <input type="checkbox"/> Contractor <input type="checkbox"/> Architect/ Engineer <input type="checkbox"/> Tenant/ Business Owner <input type="checkbox"/> Other/ Agent			
APPLICANT NAME		PHONE #	
ADDRESS		EMAIL	
VI. Contact Information if other than Applicant			
CONTACT NAME		PHONE #	
CONTACT ADDRESS		EMAIL	
FOR COUNTY USE ONLY:			
Requesting: <input type="checkbox"/> CO <input type="checkbox"/> CO-L Release Ltr    Misc Inspections: <input type="checkbox"/> No <input type="checkbox"/> Yes    Ltr Authz/ Lease Agmt req'd: <input type="checkbox"/> No <input type="checkbox"/> Yes Replacement: <input type="checkbox"/> No <input type="checkbox"/> Yes, to replace CO # _____ Date Issued _____ Space previously occupied by: _____ ***** Approvals: <input type="checkbox"/> DSA Building <input type="checkbox"/> DSA Civil Construction <input type="checkbox"/> Environmental Mgt <input type="checkbox"/> Health <input type="checkbox"/> DOE <input type="checkbox"/> Water (Check all that apply) <input type="checkbox"/> DSA Electrical <input type="checkbox"/> DSA Plumbing <input type="checkbox"/> Fire <input type="checkbox"/> Housing <input type="checkbox"/> Planning <input type="checkbox"/> Parks *****			
REMARKS: Construction Type _____		Unauthorized Occupancy: <input type="checkbox"/> No <input type="checkbox"/> Yes, \$ _____ fine.	
Occupancy Group _____		Temporary to expire : _____, _____,	
Occupant Load _____ (Day Care Only)		_____, _____, _____	
		Application Date	Application Number
		Issue Date	Permit Number

**INSTRUCTIONS FOR COMPLETING THE  
APPLICATION FOR CERTIFICATE OF OCCUPANCY**

Type or print legibly. Incomplete applications will not be processed.

**I. Certificate of Occupancy Information**

Project Name: Name of business. For residential release letter, name of owner on building permit.  
Building Name: Name of building when applicable, e.g. Aloha Building. Can be name of shopping mall.  
Building Address: Address of building. \*For address information, call DSA Engineering at (808) 270-7242.  
Check all that apply: Check all criteria that apply to the project.  
To Be Occupied As: Enter use as approved on the building permit. If application for certificate of occupancy is by miscellaneous inspection, please consult with the Building Permit Office at (808) 270-7250.  
Unit #, or Description: If applicable, enter unit or room number, or describe area within structure to be occupied.  
Floor Area: Enter square footage of floor area to be occupied.

**II. Property Information**

Tax Map Key: Enter the current Tax Map Key (TMK) for the property.  
Property Address: County assigned address for the property. \*For address information, call (808) 270-7242.  
Property Owner: Property owner name as filed with Real Property Tax Division, or submit copy of recorded deed.  
Owner's Address: Mailing address of property owner.

**III. Permit Information:** Complete only if the information on a building permit was issued for this application.

**IV. Plan Review Waiver Permit:** If applicable, name of architect or engineer who certified the County's plan review waiver building permit.

**V. Applicant Information:** Select type of applicant, then complete the applicant's information.

**VI. Contact Information:** Complete contact person's information. All correspondence will be directed to the contact person.

The following agencies may be required to review and approve the application. It is the responsibility of the applicant to follow up with agencies that have not approved. Status of the application can be obtained online at the County of Maui's website ([www.co.maui.hi.us](http://www.co.maui.hi.us) → How Do I? → Check Status of Building Permits), or by contacting the Building Permit Office at (808) 270-7250 or [building\\_permits@mauicounty.gov](mailto:building_permits@mauicounty.gov).

(INSP-BLDG)	Building Inspection	<a href="mailto:dsa.building@mauicounty.gov">dsa.building@mauicounty.gov</a> ,	(808) 270-7375	Fax (808) 270-5520
(INSP-ELEC)	Electrical Inspection	<a href="mailto:dsa.electrical@mauicounty.gov">dsa.electrical@mauicounty.gov</a>	(808) 270-7255	Fax (808) 270-5520
(INSP-PLB)	Plumbing Inspection	<a href="mailto:dsa.plumbing@mauicounty.gov">dsa.plumbing@mauicounty.gov</a>	(808) 270-7368	Fax (808) 270-5520
(EL)	Civil Construction	<a href="mailto:dsa.engineering@mauicounty.gov">dsa.engineering@mauicounty.gov</a>	(808) 270-7242	Fax (808) 270-7972
(EM)	Environmental Management	<a href="mailto:wwordco@mauicounty.gov">wwordco@mauicounty.gov</a>	(808) 270-7417	Fax (808) 270-7425
(FD)	Fire Department	<a href="mailto:fpb.inspections@mauicounty.gov">fpb.inspections@mauicounty.gov</a>	(808) 876-4690	Fax (808) 244-1363
(HD)	State Department of Health	<a href="mailto:mauidoh.bpa@doh.hawaii.gov">mauidoh.bpa@doh.hawaii.gov</a>		
		Commercial	(808) 984-8230	Fax (808) 984-8237
		Residential	(808) 984-8232	Fax (808) 984-8237
(PD)	Planning Department	<a href="mailto:planning@mauicounty.gov">planning@mauicounty.gov</a>	(808) 270-7253	Fax (808) 270-7634
(WD)	Department of Water Supply	<a href="mailto:dws.buildingpermit@mauicounty.gov">dws.buildingpermit@mauicounty.gov</a>	(808) 270-7835	Fax (808) 270-7833
(PARKS)	Parks & Recreation	<a href="mailto:parks.plandev@mauicounty.gov">parks.plandev@mauicounty.gov</a>	(808) 270-7931	Fax (808) 270-7934
(HHC)	Housing and Human Concern* (Plan Review Waiver Only)	<a href="mailto:housing.hhc@mauicounty.gov">housing.hhc@mauicounty.gov</a>	(808) 270-6284	Fax (808) 270-7165
(DOE)	Department of Education (Plan Review Waiver Only)	<a href="mailto:Robyn_Loudermilk@notes.k12.hi.us">Robyn_Loudermilk@notes.k12.hi.us</a>	(808) 784-5080	Fax (808) 733-2103

The **CERTIFICATE OF OCCUPANCY APPROVAL REQUEST FORM** shall be emailed or faxed to each agency when requirements have been completed. A separate form shall be submitted to each agency.