

REQUEST FOR ADMINISTRATIVE HEARING ON
PETITION FOR APPEAL
Department of Environmental Services
City and County of Honolulu

FOR DEPARTMENT USE ONLY	
Date Received _____	Pre-hearing date _____
Documents Attached ___ Yes ___ No	Appeal hearing date _____
Filing Fee paid ___ Yes ___ No	

Petitioner Information

Name: _____

Address _____

Daytime telephone no. (____) _____

Email address: _____

Petitioner is _____ is not _____ represented by Counsel.

Petitioner's Attorney:

Name: _____

Address: _____

Telephone: _____

Email: _____

Appeal Information

Address of Property affected by Director's Decision:

Action of the Director subject to appeal:

Reasons why the Petitioner believes the Director's action is based on an erroneous finding of material fact, arbitrary or capricious decision making, or a manifest abuse of discretion (additional pages not to exceed nine (9) pages may be attached to complete this response):

Date of the Director's Action: _____

Please attach a copy of the decision document.

I understand that I may have an attorney or other person authorized by me to represent me at the hearing and at other related hearings at my own expense.

Signature of Petitioner or Attorney

Date _____

Mail to:

Hearings Officer
Department of Environmental Services
City & County of Honolulu
1000 Uluohia Street, Suite 308
Kapolei, HI 96707