

STORM WATER QUALITY DIVISION VOLUNTEER PROGRAM APPLICATION

SELECT A PROGRAM

- Adopt a Block Channel Cleanup Storm Drain Marking

Review the terms of our programs at <http://www.honolulu.gov/dfmswq/get-involved.html>. If you are still interested, submit this application page.

The Department of Facility Maintenance, City and County of Honolulu, will coordinate with the individual/group leader designated on this form to determine the specific portion of City property to work. Unless a written consent is obtained from the property owner, including a provision to hold the City harmless with respect to claims for injury or damage caused by the removal or covering of the graffiti, walls not owned by the City shall not be included in your work.

I. GENERAL INFORMATION

| | |
|--|---------------------------------|
| Group or Individual's Name | Number of Members |
| Name of Primary Contact | Email of Primary Contact Person |
| Address of Primary Contact Person | |
| Name and Phone Number of Alternate Contact | |

Approximate number of people participating in each work project: _____
Minimum 10 person group for adoptions and 4 person group for storm drain marking

II. SELECTING A PORTION OF CITY PROPERTY TO WORK

Which stream or portions of the block are you interested in working (provide at least two possibilities)?

- a. _____
- b. _____
- c. _____

Upon completion of the application page, send a copy to Storm Water Quality Division – Outreach Section.
Mail: 1000 Uluohia Street, Suite 212, Kapolei, HI 96707; Fax: 808-768-4609; Email: stormwater@honolulu.gov

----- PORTION TO BE COMPLETED BY SWQ BRANCH -----

| Received | Reviewed | Agreement Sent | Agreement Final | Training |
|----------|----------|----------------|-----------------|----------|
| | | | | |

Date & initial all fields