NOTICE TO REQUESTER					
TO:	R Brian Black (Requester's name)				
FROM:		ervices, Randy Leong 768-3391 rleo on's name, telephone number, & email addi			
DATE THAT THE RECORD REQUEST WAS RECEIVED BY AGENCY: Nov 14, 2017 DATE OF THIS NOTICE: Dec 4, 2017					
		STED (attach copy of request or provide track records from July 1, 2016 - Dec 31	<u>-</u>		
THIS NOTICE IS TO INFORM YOU THAT YOUR RECORD REQUEST:					
⊠ Will be gr	ranted in its entirety.				
Cannot be granted. Agency is unable to disclose the requested records for the following reason: Agency does not maintain the records. (HRS § 92F-3) Other agency that is believed to maintain records: Agency needs further clarification or description of the records requested. Please contact the agency and provide the following information: Request requires agency to create a summary or compilation from records, but requested information is not readily retrievable. (HRS § 92F-11(c))					
Althou on the	igh the agency maintains th	part, <u>OR</u> Is denied in its enti- e requested records, it is not disclosuS § 92F-13 and/or § 92F-22 or other in the agency will not disclose.)	sing all or part of them based		
RECORDS OR INFORMATI	ON WITHHELD	APPLICABLE STATUTES	AGENCY JUSTIFICATION		

REQUESTER'S RESPONSIBILITIES:

You are required to (1) pay any lawful fees and costs assessed; (2) make any necessary arrangements with the agency to inspect, copy or receive copies as instructed below; and (3) provide the agency any additional information requested. If you do not comply with the requirements set forth in this notice within 20 business days after the postmark date of this notice or the date the agency makes the records available, you will be presumed to have abandoned your request and the agency shall have no further duty to process your request. Once the agency begins to process your request, you may be liable for any fees and costs incurred. If you wish to cancel or modify your request, you must advise the agency upon receipt of this notice.

METHOD & TIMING OF DISCLOSURE:

Records available for public access in their entireties must be disclosed within a reasonable time, not to exceed 10 business days from the date the request was received, or after receipt of any prepayment required. Records not available in their entireties must be disclosed within 5 business days after this notice or after receipt of any prepayment required. HAR § 2-71-13(c). If incremental disclosure is authorized by HAR § 2-71-15, the first increment must be disclosed within 5 business days of this notice or after receipt of any prepayment required.

od of Disclosure:				
Inspection at the following location: As requested, a copy of the record(s) will be provided in the following manner: Available for pick-up at the following location: Will be mailed to you. Will be transmitted to you by other means requested: via email				
ng of Disclosure: All records, or the first increment if applicable, will be made available or provided to you:				
On, 20 After prepayment of 50% of fees and 100% of costs, as estimated below.				
The prior incremental disclosures, each subsequent increment will be disclosed within 20 business days after: The prior increment (if one prepayment of fees is required and received), or Receipt of each incremental prepayment, if prepayment for each increment is required.				
Records will be disclosed in increments because the records are voluminous and the following				
extenuating circumstances exist:				
1				

ESTIMATED FEES & COSTS AND PAYMENT:

FEES: For personal record requests under Part III of chapter 92F, HRS, the agency may charge you for its costs only, and fee waivers do not apply.

For public record requests under Part II of chapter 92F, HRS, the agency is authorized to charge you fees to search for, review, and segregate your request (even if a record is subsequently found to not exist or will not be disclosed in its entirety). The agency must waive the first \$30 in fees assessed for general requesters, OR in the alternative, the first \$60 in fees when the agency finds that the request is made in the public interest. Only one waiver is provided for each request. See HAR §§ 2-71-19, -31 and -32.

COSTS: For either personal or public record requests, the agency may charge you for the costs of copying and delivering records in response to your request, and other lawful fees and costs.

PREPAYMENT: The agency may require prepayment of 50% of the total estimated fees and 100% of the total estimated costs prior to processing your request. If a prepayment is required, the agency may wait to start any search for or review of the records until the prepayment is received by the agency. Additionally, if you have outstanding fees or costs from previous requests, including abandoned requests, the agency may require prepayment of 100% of the unpaid balance from prior requests before it begins any search or review for the records you are now seeking.

	_	of what you must pay, based on the estimated fees and co able waiver amount that will be deducted:	sts that the agency			
For public record requests only:						
Fees:	Search Review & segregation \$	Estimate of time to be spent: hours \$ (\$2.50 for each 15-minute period) Estimate of time to be spent:				
	Fees waived Other	(\$5.00 for each 15-minute period) general (\$30), <u>OR</u> public interest (\$60) <\$> (Only one waiver per request) (Pursuant to HAR §§ 2-71-19 & 2-71-31)				
	Total Estimated Fees:	(Pursuant to fiak §§ 2-71-19 & 2-71-31)				
For public or personal record requests:						
Costs:	Copying	Estimate of # of pages to be copied: \$ (@ \$ per page, pursuant to HRS § 92-21)				
	Delivery	Postage \$				
	Other	\$				
	Total Estimated Costs:	\$				
TOTA	\$0.00					
The estimated fees and costs above are for the first incremental disclosure only. Additional fees and costs, and no further fee waivers, will apply to future incremental disclosures.						
	PREPAYMENT IS REQUIRED (50% of fees + 100% of costs, as estimated above)					
	UNPAID BALANCE FROM PRIOR REQUESTS (100% must be paid before work begins) \$					
TOTAL AMOUNT DUE AT THIS TIME \$0.00						
	Payment may be made by	cash personal check payable to other				
beging record the re questi	ning of this form. Please is of other agencies, and a cords. If the agency deni ons regarding complia	e or the records being sought, please contact the agency poster note that the Office of Information Practices (OIP) does a requester must seek records directly from the agency it less or fails to respond to your written request for records once with the UIPA, then you may contact OIP a Hotel Street, Suite 107, Honolulu, Hawaii 96813.	erson named at the es not maintain the believes maintains or if you have other			
		OIP	(rev. 12/1/2015)			