NOTICE TO REQUESTER

TO: Tina Tuttle_____ (Requester's name)

FROM: Environmental Management Sandy Shore Sandy.Shore@hawaiicounty.gov (Agency, and agency contact person's name, telephone number, & email address)

DATE THAT THE RECORD REQUEST WAS RECEIVED BY AGENCY: 5/2/2021

DATE OF THIS NOTICE: 5/11/2021

GOVERNMENT RECORDS YOU R 1. <u>Brown & Caldwell Contract + Invo</u> <u>Project</u> 2. 3. 4.	• • • •	t or provide brief description below): wo Phases of the Pāhala LCC Conversion
THIS NOTICE IS TO INFORM YOU	J THAT YOUR RECORD REQUE	ST:
\boxtimes Will be granted in its entirety.		
Agency does not maint Other agency that is be Agency needs further of and provide the followi	ain the records. (HRS § 92F-3) elieved to maintain records: elarification or description of the reco ng information: cy to create a summary or compilation	d records for the following reason: ords requested. Please contact the agency on from records, but requested information
Although the agency maint on the exemptions provided	nied in part, <u>OR</u> Is denied ains the requested records, it is a in HRS § 92F-13 and/or § 92F-22 ds that the agency will not disclose.)	not disclosing all or part of them based 2 or other laws cited below.
RECORDS OR INFORMATION 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.

OIP (rev. 12/1/2015)

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.

Method of Disclosure:

	As requested As requested As a vail Will	the following location:				
Timing of Disclosure: All records, or the first increment if applicable, will be made available or provided to you:						
	On After prepa	, 20 yment of 50% of fees and 100% of costs, as estimated below.				
For in	cremental di	sclosures, each subsequent increment will be disclosed within 20 business days after:				
	The prior increment (if one prepayment of fees is required and received), or					
	Recei	pt 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:					
		Agency must consult with another person to determine whether the record is exempt from disclosure under HRS chapter 92F.				
		Request requires extensive agency efforts to search, review, or segregate the records or				
		otherwise prepare the records for inspection or copying.				
		Agency requires additional time to respond to the request in order to avoid an				
	_	unreasonable interference with its other statutory duties and functions.				
		A natural disaster or other situation beyond agency's control prevents agency from				
		responding to the request within 10 business days.				

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.

The following is an itemization of what you must pay, based on the estimated fees and costs that the agency will charge you and the applicable waiver amount that will be deducted:

For public record requests only:

Fees:	Search	Estimate of time to be spent: hours (\$2.50 for each 15-minute period)	\$					
	Review & segregation	Estimate of time to be spent: hours	\$					
	Fees waived	(\$5.00 for each 15-minute period) \Box general (\$30), <u>OR</u> \Box public interest (\$60)	<\$ 30.00>					
	Other	(Only one waiver per request)	\$					
		(Pursuant to HAR §§ 2-71-19 & 2-71-31)	Ψ					
	Total Estimated Fees:		\$_0.00	<u>!</u>				
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:		\$					
TOTAL ESTIMATED FEES AND COSTS from above:								
	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 						
beginr	ning of this form. Please	or the records being sought, please contact t e note that the Office of Information Practice a requester must seek records directly from th	es (OIP) does no	t maintain the				

the records. If the agency denies or fails to respond to your written request for records or if you have other questions regarding compliance with the UIPA, then you may contact OIP at (808) 586-1400, <u>oip@hawaii.gov</u>, or 250 South Hotel Street, Suite 107, Honolulu, Hawaii 96813.

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