	Anita Hofschneider (ahofschneider@civilbeat.com)					
	(Requester's name)					
FROM:	808- 973-9560, hdoa.info@	Dept. of Agriculture 1428 S. Kinghawaii.gov erson's name, telephone number, & en				
DATE THA	T THE RECORD REQUES	T WAS RECEIVED BY AGENO	CY: 01/24/18			
DATE OF T	THIS NOTICE: 01/3	31/18				
	ENT RECORDS YOU REQU attached Request to Access a Go	<b>ESTED</b> (attach copy of request or overnment Record	provide brief description below):			
THIS NOTI	CE IS TO INFORM YOU TH	AT YOUR RECORD REQUEST:				
☐ Will be	granted in its entirety.					
☐ Cannot	Agency does not maintain to Other agency that is believed. Agency needs further clarify and provide the following in	ed to maintain records:ication or description of the records aformation:create a summary or compilation for	requested. Please contact the agency rom records, but requested information			
Alth on tl	ough the agency maintains ne exemptions provided in	in part, OR Is denied in it the requested records, it is not HRS § 92F-13 and/or § 92F-22 or at the agency will not disclose.)	disclosing all or part of them based			
`		APPLICABLE STATUTES	AGENCY JUSTIFICATION			
RECORDS C INFORMA' Information	FION WITHHELD in which an individual has privacy interest will be	Section 92F-13(1), HRS,	Significant privacy interest (private employment)			

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

OIP (rev. 12/1/2015)

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:

Method 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.

	Inspec	tion at the following location:
Will be mailed to you.  Will be transmitted to you by other means requested: email to all transmitted to you by other means requested: email to all training of Disclosure: All records, or the first increment if applicable, will be  On January 26, 2018.  After prepayment of 50% of fees and 100% of costs, as estimated below.  For incremental disclosures, each subsequent increment will be disclosed with the prior increment (if one prepayment of fees is required and reflected to the records are records will be disclosed in increments because the records are extenuating circumstances exist:  Agency must consult with another person to determine we from disclosure under HRS chapter 92F.	uested, 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.
	$\boxtimes$	Will be transmitted to you by other means requested: email to ahofschneider@civilbeat.com.
Timin	g of Dis	sclosure: All records, or the first increment if applicable, will be made available or provided to you:
$\boxtimes$	On Jar	nuary 26, 2018.
	After	<b>prepayment</b> of 50% of fees and 100% of costs, as estimated below.
For in	cremer	ntal 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.
	Recor	ds will be disclosed in increments because the records are voluminous and the following
	exten	uating circumstances exist:
		Agency must consult with another person to determine whether the record is exempt
		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: <0.25 hours (\$2.50 for each 15-minute period)	\$	
	Review & segregation	Estimate of time to be spent: <0.25 hours	\$5.00	
	Fees waived	(\$5.00 for each 15-minute period) $ \square $ general (\$30), $ \underline{\mathbf{OR}} $ $ \square $ public interest (\$60)	<\$ <u>60.00</u>	
	Other	(Only one waiver per request)	\$	
	Outo	(Pursuant to HAR §§ 2-71-19 & 2-71-31)	Ψ	
	<b>Total Estimated Fees</b> :		\$ <u>0.0</u>	<u>00</u>
For pu	ıblic or personal record	requests:		
Costs:	Copying	Estimate of # of pages to be copied: <u>0</u> (@ \$ per page, pursuant to HRS § 92-21)	\$0.00	
	Delivery	Postage	\$0.00	
	Other		\$	
	<b>Total Estimated Costs</b> :		\$ 0.00	
TOTA	L ESTIMATED FEES AN	D COSTS from above:		\$0.00
		costs above are for the first incremental disc er fee waivers, will apply to future incremen	•	dditional fees
	PREPAYMENT IS REQ	UIRED (50% of fees + 100% of costs, as estimated	above)	\$
	UNPAID BALANCE FRO	OM PRIOR REQUESTS (100% must be paid bef	Fore work begins)	\$
TOTA	AL AMOUNT DUE A	AT THIS TIME		\$0.00
	Payment may be made by:	cash personal check payable to other		
-			1	1 1

For questions about this notice or the records being sought, please contact the agency person named at the beginning of this form. Please note that the Office of Information Practices (OIP) does not maintain the records of other agencies, and a requester must seek records directly from the agency it believes maintains 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, oip@hawaii.gov, or 250 South Hotel Street, Suite 107, Honolulu, Hawaii 96813.

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# REQUEST TO ACCESS A GOVERNMENT RECORD

This is a model form that may be used by a Requester to provide sufficient information for an agency to process a record request. Although the Requester is not required to use this form or to provide any personal information, the agency needs enough information to contact the Requester with questions about this request or to provide its response. This request may not be processed if the agency has insufficient information or is unable to contact the Requester.

DATE: 01-24-2018

TO: Department of Agriculture

Agency that Maintains the Government Record

hdoa.info@hawaii.gov Agency's Contact Information

FROM: request+phkx8hbp5t@foi.uipa.org

Requester's Name or Alias

request+phkx8hbp5t@foi.uipa.org

**Requester's Contact Information** 

#### AS THE REQUESTER, I WOULD LIKE THE FOLLOWING GOVERNMENT RECORD:

Describe the government record as specifically as possible so that it can be located. Try to provide a record name, subject matter, date, location, purpose, or names of persons to whom the record refers, or other information that could help the agency identify the record. A complete and accurate description of the requested government record will prevent delays in locating the record. Attach additional pages if needed.

I'd like to request electronic copies of the HDOA Pesticide Branch's quarterly reports to EPA Region IX for July-September 2017 and October-December 2017.

I'm a reporter at Honolulu Civil Beat and I request that fees be waived in the public interest because this information will be used for a potential news story. I prefer to receive the document via email sent to ahofschneider@civilbeat.com. Thank you for your help and please call me if you have any questions at 808-373-6678.

I WO	<u>ULD LIKE</u> :	(Please check one or more of the options below, as applicable)	
	To inspect th	e government record	
	A copy of th	e government record: (Please check only one of the options below.) See the next	page for
	information a	bout fees and costs that you may be required to pay for agency services to produce	cess your
	record reques	t. Note: Copying and transmission charges may also apply to certain options.	

	Pick up at agency (date and time):  Mail (address):  [X] E-mail (address): request+phkx8hbp5t@foi.uipa.org  Fax (toll free and only if available; provide fax number):
	Other, if available (please specify):
	If the agency maintains the records in a form <u>other than paper</u> , please advise in which <b>format you would prefer to have the record</b> .
[X]	Check this box if you are attaching a request for waiver of fees in the public interest (See waiver information on next page).
<b>FEES</b>	FOR PROCESSING PUBLIC RECORD REQUESTS
	hay be charged fees for the services that the agency must perform when processing your request for public ls, including fees for making photocopies and other lawful fees. <b>The first \$30 of fees charged for</b>

searching for a record, reviewing, and segregating will not be charged to you. Any amount over \$30 will be

Search for a Record Review and Segregation of a Record

\$2.50 for 15 minutes \$5.00 for 15 minutes

Generally, no search, review, and segregation fees may be charged if you are making a request for personal records that are about you.

## WAIVER OF FEES IN THE PUBLIC INTEREST

**charged to you.** Fees are as follows:

As an <u>alternative</u> to the \$30 fee waiver (not in addition to), the agency may waive the first \$60 of fees for searching for, reviewing and segregating records when the waiver would serve the public interest. If you wish to apply for a waiver of fees in the public interest, you must attach to this request a statement of facts, including your identity as the requester, to show how the waiver of fees would serve the public interest. The criteria for this waiver, found at section 2-71-32, Hawaii Administrative Rules, are

- (1) The requested record pertains to the operations or activities of an agency;
- (2) The record is not readily available in the public domain; and
- (3) The requester has the primary intention and the actual ability to widely disseminate information from the government record to the public at large.

## **COSTS**

The Agency may charge you any other lawful fees and the costs to copy and deliver your personal or public record request.

# AGENCY RESPONSE TO YOUR REQUEST FOR ACCESS

The agency to which you addressed your request must respond within a set time period. The agency will normally respond to you within 10 business days from the date it receives your request; however, in *extenuating circumstances*, the agency must respond within 20 business days from the date of your request. If you have questions about the response time or the records being sought, you should first contact the agency and request to consult with the agency's UIPA contact person.

Please note that the Office of Information Practices (OIP) does not maintain the records of other agencies and a requester must seek records directly from the agency. If the agency denies or fails to respond to your

KEQUESTER 5 Ki	ESPONSIBILITIES					
arrangements to instructed by the	nspect and copy rec	ords, providing f and making a pr	urther clarification properties of the entire contraction in the entir	on or description of s and costs, if as	, which include ma f the requested recor ssessed. The rules	d as