NOTICE TO REQUESTER								
TO:	Sandra Demoruelle							
	(Requester's name)							
FROM:	Office of Environmental Quality Control, Scott Glenn 586-4185 oeqchawaii@doh.hawaii.gov							
	(Agency, and agency contact person's name, telephone number, & email address)							
DATE THAT	THE RECORD REQUEST V	WAS RECEIVED BY AGENCY:	2/25/2019					
DATE OF TH	IIS NOTICE: <u>2/26/2019</u>							
 In August 2 withdrawal August 23, 	2018, the County of Hawaii Dep of the FEA/FONSI for the Naa 2007 in T.E.N. COHDEM imm	CTED (attach copy of request or provide artment of Environmental Managemen lehu/Pahala [Ka'u] Large Capacity Cest ediately cancelled this requested withd sts and your correspondence with COHI	t (COHDEM) requested spool [LCC] Project published rawal.					
THIS NOTICE IS TO INFORM YOU THAT YOUR RECORD REQUEST:								
X Will be g	canted in its entirety.							
Cannot b	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))							
Will be granted in part and denied in part, OR ☐ Is denied in its entirety Although the agency maintains the requested records, it is not disclosing all or part of them based on the exemptions provided in HRS § 92F-13 and/or § 92F-22 or other laws cited below. (Describe the portions of records that the agency will not disclose.)								
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.

Metho	od of Disclosure:					
X	Inspection at the following location:					
Timin	ng of Disclosure: All records, or the first increment if applicable, will be made available or provided to you:					
X	On <u>February 26</u> , 2019. After prepayment of 50% of fees and 100% of costs, as estimated below.					
For ir	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 followi						
	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

_		abandoned requests, the agency may require prit begins any search or review for the records you			f the unpaid		
		of what you must pay, based on the estimated able waiver amount that will be deducted:	fees and co	sts that	the agency		
For pu	ıblic record requests onl	<u>y</u> :					
Fees:	Search	Estimate of time to be spent: 2 hours	\$ 20.00				
	Review & segregation	(\$2.50 for each 15-minute period) Estimate of time to be spent:0 hours (\$5.00 for each 15-minute period)	\$				
	Fees waived		<\$ <u>30.00</u> >				
	Other	(Pursuant to HAR §§ 2-71-19 & 2-71-31)	\$				
	Total Estimated Fees:	(1 distant to limit 38 2-11-13 & 2-11-31)	\$	0.00			
	Total Estimated Tees.		ψ	0.00			
For pu	ablic 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	L ESTIMATED FEES AN	D COSTS from above:		\$	0.00		
X	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 REQ	\$					
	UNPAID BALANCE FROM PRIOR REQUESTS (100% must be paid before work begins) \$						
TOT	AL AMOUNT DUE A	AT THIS TIME		\$			
	Payment may be made by:	cash personal check payable to x other					
beginn record the rec questi	ning of this form. Please s of other agencies, and a cords. If the agency deni ons regarding complian	or the records being sought, please contact the note that the Office of Information Practices requester must seek records directly from the sor fails to respond to your written request face with the UIPA, then you may contact the Street, Suite 107, Honolulu, Hawaii 968	s (OIP) does the agency it for records of act OIP a	s not m believes or if you	aintain the s maintains have other		
			OIP	(rev. 12/1/	′2015)		