APPENDIX MAUI-35

Special Accessory Use Approval Permit (ACC)
County of Maui
Department of Planning
Planning Commission

Permit Packet Includes:

1. Process Overview
2. County Special Accessory Use Approval In The Urban Land Use Classification Application Packet & instructions

Resources:

- MCC, Section 19.14.020 16, Hotel Districts, Permitted Uses
- MCC, Section 19.18.020 66, B-2 Community Business District, Permitted Uses
- MCC, Section 19.22.020 R, B-R Resort Commercial District, Permitted Uses

Approval or Permit Required: To allow specific, similar, or related accessory uses as provided for under Title 19, Maui County Zoning Ordinance, including the Hotel Districts, B-2 Community Business District, and B-R Resort Commercial District.

Contact Information:
Department of Planning
Current Planning Division
2200 Main Street, Suite 619
Wailuku, HI 96793
Phone: 808-270-8205

Website: http://www.co.maui.hi.us/index.aspx?NID=1207

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Steps	Time
1. Obtain a "***County Special Accessory Use Approval in the Urban Land Use Classification***" application packet from the Maui Department of Planning or from the website listed above. Please read the criteria portion on the Informational Sheet (page 1 of the packet) thoroughly.	
2. Complete the application packet. Please review and complete the "Required Submittals" provided in the application packet. Also review and complete the "Zoning and Flood Confirmation" form provided in the application packet, which may prompt applicant to obtain a Flood Development Permit or submit additional information. It is the responsibility of the applicant to fully complete the application. The accepting agency may or may not inform the applicant of whether the application is complete. Incomplete applications will cause delay.	
3. Submit completed application and all required forms and related documents to the Department of Planning (see "Required Submittals"). Additional copies must be submitted for projects fronting a State Highway or located on Molokai or Lanai. Submit fee with the application (see below for fee amount). Make checks payable to the "County of Maui, Director of Finance".	
4. After acceptance of the application by the Department of Planning, it will be transmitted to the appropriate referral agencies. If the application is complete, a date will be scheduled with the respective Planning Commission.	
5. Decision by the appropriate Planning Commission (Maui, Molokai, Lanai) to approve or deny permit.	No timeline for decision

Total Time Period: **TBD**

Fees	Amount	Total
Fees dependent on cost of project. Please refer to Fee Schedule, Table B for complete listing.	$55 (based on project)	
Total Fees:	$55 (minimum)	No maximum

COUNTY OF MAUI
DEPARTMENT OF PLANNING
250 SOUTH HIGH STREET
WAILUKU, MAUI, HAWAII 96793
TELEPHONE: (808) 270-7735 FAX: (808) 270-7634

COUNTY SPECIAL ACCESSORY USE APPROVAL IN THE URBAN LAND USE CLASSIFICATION

SOURCE OF LEGAL AUTHORITY: Maui County Code, Title 19, as amended.

INFORMATIONAL SHEET

A Special Accessory Use approval may be obtained from the respective Planning Commission as specified in various chapters of Title 19, Maui County Zoning Ordinance for certain specific, similar, or related uses, provided that no conflict arises with the intent of the specified zoning district uses.

Upon submittal of the County Accessory Special Use Approval Application, a date will be scheduled with the respective Planning Commission to review and act upon the request.

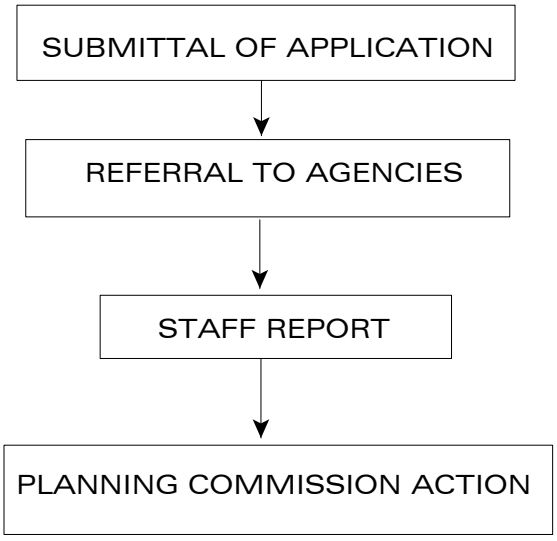
Between the date of acceptance and Planning Commission Date, the following must be completed:

PLANNING DEPARTMENT

Referral to other agencies for comments.

Preparation of report.

FLOW CHART



COUNTY OF MAUI
DEPARTMENT OF PLANNING
250 SOUTH HIGH STREET
WAILUKU, MAUI, HAWAII 96793

APPLICATION TYPE: COUNTY SPECIAL ACCESSORY USE APPROVAL IN THE URBAN LAND USE CLASSIFICATION

DATE: _____ VALUATION: $_____

PROJECT NAME: _____

PROPOSED DEVELOPMENT:_____

_____

TAX MAP KEY NO.: _____ CPR/HPR NO.: _____ LOT SIZE: _____

PROPERTY ADDRESS: _____

OWNER: _____ PHONE:(B)_____ (H)_____

ADDRESS: _____

CITY: _____ STATE: _____ZIP CODE: _____

OWNER SIGNATURE: _____

APPLICANT: _____

ADDRESS: _____

CITY: _____ STATE: _____ ZIP CODE: _____

PHONE (B): _____ (H): _____ FAX:_____

APPLICANT SIGNATURE: _____

AGENT NAME: _____

ADDRESS: _____

CITY: _____ STATE: _____ ZIP CODE:_____

PHONE (B): _____ (H): _____ FAX: _____

EXISTING USE OF PROPERTY: _____

CURRENT STATE LAND USE DISTRICT BOUNDARY DESIGNATION: _____

COMMUNITY PLAN DESIGNATION: _____ ZONING DESIGNATION: _____

OTHER SPECIAL DESIGNATIONS: _____

COUNTY SPECIAL ACCESSORY USE APPROVAL
REQUIRED SUBMITTALS

____ 1. Evidence that the applicant is the owner or lessee of record of the real property.

____ 2. A notarized letter of authorization from the legal owner if the applicant is not the owner.

____ 3. Reason(s) justifying the request.

____ 4. Six (6) sets of a plot plan of the property, drawn to scale, to include but not be limited to, existing and proposed structure(s) (for new construction, submit architectural plans to include elevations, section, floor plan, etc.), driveway access, parking area, etc.

NOTE: Two (2) additional copies for projects located on Molokai and Lanai.

One (1) additional copy if the project fronts a State Highway.

____ **5. Non-refundable filing fee** (see Fee Schedule, Table B), payable to *County of Maui, Director of Finance*.

COUNTY OF MAUI
DEPARTMENT OF PLANNING

ZONING AND FLOOD CONFIRMATION REQUEST FORM

APPLICANT: _____ PHONE NO.: _____

ADDRESS: _____

PROJECT NAME: _____

ADDRESS AND/OR LOCATION: _____

TMK NUMBER(S): _____

ZONING INFORMATION

STATE LAND USE _____ COMMUNITY PLAN _____

COUNTY ZONING _____ SPECIAL DISTRICT _____

OTHER _____

FLOOD INFORMATION

FLOOD HAZARD AREA* ZONE _____

BASE FLOOD ELEVATION _____ mean sea level, 1929 National Geodetic Vertical Datum or for Flood Zone A0, FLOOD DEPTH _____feet.

FLOODWAY [ ] Yes or [ ] No

FLOOD DEVELOPMENT PERMIT IS REQUIRED [ ] Yes or [ ] No
* For flood hazard area zones B or C; a flood development permit would be required if any work is done in any drainage facility or stream area that would reduce the capacity of the drainage facility, river, or stream, or adversely affect downstream property.

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FOR COUNTY USE ONLY

REMARKS/COMMENTS: _____

- ☐ Additional information required.
- ☐ Information submitted is correct.
- ☐ Correction has been made and initialed.

Reviewed and Confirmed by:

_____ _____

Signature Date

Zoning Administration and Enforcement Division