



DEPARTMENT OF WATER  
COUNTY OF KAUA'I

*"Water has no Substitute – Conserve It!"*

NOVEMBER 2009

CONVEYANCE OF WATER FACILITY (COWF)  
for a  
**DOUBLE SERVICE LATERAL WITH TWO (2) TAX MAP KEY NOS. (TMK)**

*Instruction Sheet*

**COWF Process for information:**

1. Once you have final inspection by the Department of Water for all of the water facilities that you have constructed and you want to convey the water facilities to the Department of Water, you need to execute the attached Conveyance of Water Facility document.
2. Please submit your conveyance document to the Department of Water for their review. Upon final completion of your water facilities and legal review of your conveyance document, it will be on the next scheduled Board of Water Supply meeting agenda for the Board's approval. (The Board meets once a month.)
3. Once your conveyance document is approved and all of your other requirements are met, your project will receive a Certification of Completion.

**Instructions to execute ATTACHED conveyance document:**

1. **AGREEMENT MUST BE TYPED. USE ONLY BLACK INK FOR INFORMATION PROVIDED BY THE APPLICANT, ALL SIGNATURES AND THE NOTARY'S INFORMATION AND SIGNATURE.** If you are signing as an individual or on behalf of a corporation, partnership, etc., **you may be asked to submit a copy of your current deed and a letter of authorization from your corporation, partnership, etc., stating that you are authorize to sign on behalf of the corporation, partnership, etc. Also, please have your situation stated exactly and consistent throughout: a) the body of the document, b) the signature section and c) the notary section. If there is more than one party to the document, please be sure all signatures are notarized.**
2. **Do Not** use abbreviations [e.g. Department of Water (DOW)].
3. **Example of Tax Map Key Number (TMK):**  
(4) 3 - 8 - 0 0 5 : 0 0 2; and (4) 3 - 8 - 0 0 5 : 0 0 3;

For this DOW document, please fill out the TMK No. blank as per the sample above; detailed explanation below:

- (4): is for island of Kaua'i.
- 3: Zone No. (max. 1 digit)
- 8: Section No. (max. 1 digit)
- 005: Plat No. (max. 3 digits)
- 002: Parcel (max 3 digits)

4. **ALL** blanks must be filled out, including the notary section or please insert **Not Applicable**.
5. Please use the following format to fit your situation:

**Individual:** I, John Doe, unmarried, whose mailing address is..... and whose residence address is.....

**Husband/Wife:** I (We), John Doe and Jane Doe husband and wife, whose mailing address .... and whose residence address is.....

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**Trust:** I (We), John Doe, Trustee of the John Doe Revocable Living Trust dated January 1, 2000, and Jane Doe, Trustee of the Jane Doe Revocable Living Trust dated January 1, 2000, whose mailing address is ... and whose residence address is.....

**Corporation:**

**Company/Association:** - - - whose principal place of business and mailing address is.....

**Partnership:** - - - whose principal place of business and mailing address is.....

**Power of Attorney:** - - - whose principal place of business and mailing address is.....

6. Please attach applicable notary section to your document that will fit your situation. Please see example notary sections on our website and select the notary section that is applicable to your situation (for example: a partnership or corporation, with a corporate seal, if applicable, is necessary.) Your notary may also have applicable notary sections.

**The Bureau will accept only 8 ½" x 11" paper**, nothing smaller or larger, nor small sections of paper stapled onto any page of your document.

7. Describe in detail all water facilities that are to be conveyed to the Board of Water Supply, i.e., length, size and type (AC, PVC, Ductile Iron) of pipelines; size and number of water meter laterals; size and number of fire hydrant assemblies; size, number and type of mainline valves, together with appurtenant meter boxes, covers, etc.}
8. **Please submit one (1) original and two (2) copies. (After all reviews are done and agreement is okay for signature and notary.)**

The Department of Water will record your conveyance document at the Bureau of Conveyances. Upon its completion, we will send you a recorded copy for your files.

**Instructions to execute your RETYPED conveyance document:**

If the attached conveyance document does not fit your situation, please retype this conveyance to include whatever is applicable for your situation, using the attached conveyance as a guideline.

1. Please be sure to keep a clear 3½-inch top margin for the first page of your document so the Bureau of Conveyance can place their stamp when your document is recorded at the Bureau.
2. Also follow Item Nos. 1-8 above.

If you have questions, please call the Department of Water at (808) 245-5468 or you may visit our website at: [http://www.kauaiwater.org/svc\\_applications.asp](http://www.kauaiwater.org/svc_applications.asp). Thank you.

**LAND COURT SYSTEM**

**REGULAR SYSTEM**

After Recordation Return By: **MAIL [XX]** Pickup [ ]  
TO:

**DEPARTMENT OF WATER**  
**PO BOX 1706**  
**LĪHU'E, HAWAI'I 96766**

**CONVEYANCE OF WATER FACILITY**  
for

**TMK:** (4) \_\_\_\_ - \_\_\_\_ - \_\_\_\_ : \_\_\_\_ ; and  
(4) \_\_\_\_ - \_\_\_\_ - \_\_\_\_ : \_\_\_\_ ;

**KNOW ALL MEN BY THESE PRESENTS:**

In compliance with the Rules and Regulations of the Department of Water, County of Kaua'i, State of Hawai'i, and in consideration of the water supply, service and maintenance hereafter to be provided by said department,

herein called the "OWNER", whose mailing address is

and whose residence address is

does hereby convey and transfer unto the **BOARD OF WATER SUPPLY, COUNTY OF KAUA'I**, HEREIN CALLED THE "BOARD", whose mailing address is PO Box 1706, Līhu'e, Kaua'i, Hawai'i 96766, for: **Tax Map Key No.**

**(TMK)** (4) \_\_\_\_ - \_\_\_\_ - \_\_\_\_ : \_\_\_\_; and (4) \_\_\_\_ - \_\_\_\_ - \_\_\_\_ : \_\_\_\_;

**District:** \_\_\_\_\_, **Kaua'i, Hawai'i; PROJECT NAME:**

, **PROJECT NO.:** \_\_\_\_\_, **SUBDIVISION NO.:** \_\_\_\_\_, all its right, title and interest in and to:

The "OWNER" covenants with the "BOARD", its successors and assigns, that it is the lawful owner of the facilities above conveyed and that the same is free and clear of all liens and claims and that it will hold said "BOARD" free and clear of all claims against said facilities of all persons whomsoever.

This Agreement may be executed in counterparts. Each counterpart shall be executed by one or more parties hereinbefore named and the several counterparts shall constitute one instrument to the same effect as though the signatures of all the parties are upon the same document.

IN WITNESS WHEREOF, APPLICANT has executed this AGREEMENT this \_\_\_\_\_ day of \_\_\_\_\_, \_\_\_\_\_.

**APPROVED:**

**OWNER:**

\_\_\_\_\_  
Manager & Chief Engineer  
Department of Water, County of Kaua'i

\_\_\_\_\_  
By: \_\_\_\_\_  
(Please type or stamp name above.)

**OWNER:**

\_\_\_\_\_  
By: \_\_\_\_\_  
(Please type or stamp name above.)

**APPROVED AS TO FORM  
AND LEGALITY:**

**ACCEPTED:  
BOARD OF WATER SUPPLY,  
COUNTY OF KAUA'I**

\_\_\_\_\_  
County Attorney

\_\_\_\_\_  
By Its \_\_\_\_\_

STATE OF HAWAII            )  
  ) ss.  
COUNTY OF KAUA'I        )

On this \_\_\_\_\_ day of \_\_\_\_\_, \_\_\_\_\_, before me appeared \_\_\_\_\_  
\_\_\_\_\_, to me personally known, who, being by me duly sworn, did say that said officer is the  
\_\_\_\_\_ Chairperson of the **COUNTY OF KAUA'I, BOARD OF WATER SUPPLY**, and that the foregoing  
instrument was signed on behalf of said Department, and said officer acknowledged said instrument to be the free act  
and deed of said Department, and that said Department has no corporate seal.

\_\_\_\_\_  
Notary Public, State of Hawaii

Name of Notary: \_\_\_\_\_  
My Commission expires: \_\_\_\_\_

Owner: Please attach applicable notary section to your document (need to be letter size paper, 8-1/2" by 11"). Your notary section should match the situation under which you are signing this document. (You can check our website for a list of example notary sections.)