

FIRST TIME VOTERS MAILING THIS APPLICATION

If you are 1) registering to vote for the first time in the State of Hawaii; 2) mailing this application; and 3) do not have a HI Driver License, HI State ID, or last 4-digits of a Social Security Number, you are required to provide proof of identification.

Proof of identification includes a copy of:

- A current and valid photo identification; or
- A current utility bill, bank statement, government check, paycheck, or other government document that shows your name and address.

SUBMITTING APPLICATION

Mail or deliver your application to your Clerk's Office at the address below.

County of Hawaii

25 Aupuni St., Rm. 1502
Hilo, HI 96720

County of Kauai

4386 Rice St., Rm. 101
Lihue, HI 96766

County of Maui

200 S. High St., Rm. 708
Wailuku, HI 96793

City & County of Honolulu

530 S. King St., Rm. 100
Honolulu, HI 96813

DEADLINE TO SUBMIT APPLICATION

Registering to Vote: No later than 30 days prior to the election.

Requesting a Permanent Absentee Ballot: No later than 7 days prior to the election.

LANGUAGE ASSISTANCE

若想獲得電子檔的翻譯材料，或者需要協助填表事宜，請聯繫 選舉辦公室 (Office of Elections).

Para kadagiti naipatarus a materiales a mainaig iti eleksion wenno tulong iti lengguahe tapno makompletoyo daytoy nga aplikasion, awagan ti Opisina Dagiti Eleksion (Office of Elections).

CONTACTUS

For voter registration and absentee voting information, contact your **Clerk's Office**.

County of Hawaii(808) 961-8277

County of Maui.....(808) 270-7749

County of Kauai.....(808) 241-4800

City & County of Honolulu.....(808) 768-3800

For additional voting information, contact the **Office of Elections**.

(808) 453-VOTE (8683)

Toll Free: 1-800-442-VOTE (8683)



TTY: (808) 453-6150

Toll Free TTY: 1-800-345-5915

Email: elections@hawaii.gov

Website: www.elections.hawaii.gov

VOTER REGISTRATION + PERMANENT ABSENTEE APPLICATION

Hawaii Voter Registration & Permanent Absentee Application

This application can be used for:

- First time registration
- Request to vote by mail permanently
- Name change
- Address change

Please print clearly in black ink.

| | | | |
|---|---|------------------------------|-----------------------------|
| 1 | Are you a citizen of the United States of America? | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| | Are you at least 16 years of age? (Must be 18 to vote) | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| | Are you a resident of the State of Hawaii? ¹ | <input type="checkbox"/> Yes | <input type="checkbox"/> No |

If you answered "No" to any of the above, DO NOT complete this form.

¹The residence stated in this affidavit is not simply because of my presence in the State, but was acquired with the intent to make Hawaii my legal residence with all the accompanying obligations therein.

| | | | | |
|---|-----------|------------|------|------------------|
| 2 | Last Name | First Name | M.I. | Suffix (Jr., II) |
| | | | | |

| | | | |
|---|---|----|--|
| 3 | HI Driver License or HI State ID Number If you do not have either, complete box 3b. | 3b | <input type="checkbox"/> I do not have a HI Driver License or HI State ID. Provide the last 4-digits of your Social Security Number. _____ |
| | <input type="checkbox"/> I do not have a HI Driver License, HI State ID, or SSN. | | |

| | | | |
|---|---------------|--------------|-------|
| 4 | Date of Birth | Phone Number | Email |
| | | | |

| | | | | |
|---|--|-------------|------|----------|
| 5 | Residence Address (P.O. Box, R.R., S.R. are <u>not</u> acceptable) | Apt. Number | City | Zip Code |
| | Mailing Address in Hawaii <input type="checkbox"/> Same as Residence Address | Apt. Number | City | Zip Code |
| | If your residence does not have a street address, describe the location (cross streets, landmarks). | | | |

| | | | |
|---|--|----|--|
| 6 | Are you registered to vote in another state? | 6b | Last Registered Address, County, State, and Zip Code |
| | <input type="checkbox"/> Yes. I hereby authorize cancellation of my previous registration. Complete box 6b. | | |

| | |
|---|--|
| 7 | Would you like to permanently receive absentee ballots by mail? |
| | <input type="checkbox"/> Yes. I request to permanently receive absentee ballots at the mailing address associated with my voter registration. |


I understand that my permanent absentee voter status will be terminated if: 1) I request termination in writing; 2) I die, lose voting rights, register in another jurisdiction, or am otherwise disqualified from voting; 3) my absentee ballot, voter notification postcard, or any other election mail is returned to the clerk as undeliverable for any reason; or 4) I do not return my ballot by 6:00 PM on election day in both the primary and general election of an election year. If so, I understand that I must reapply for permanent absentee status.

Warning: Any person who knowingly furnishes false information may be guilty of a Class C felony.

I hereby swear (or affirm) that all information furnished on this application is true and correct.

| | | |
|---|------------------|------|
| 8 | SIGN HERE | Date |
| | | |

If you are unable to sign, mark the signature line and have a witness provide signature, address, and phone number.

| | | | | |
|-----------------|-----------|---------------|-----------------|---|
| Office Use Only | ID Number | Location Code | Document Number |  |
| | | | | |

Notice: The identity of the voter registration agency through which any particular voter was registered shall not be publicly disclosed. A person's declination to register to vote is also confidential and is used for voter registration purposes only (National Voter Registration Act of 1993).