COUNTY OF KAUA'I PLANNING DEPARTMENT • (808) 241-4050
4444 Rice Street, Suite A473 • Lihu'e, HI 96766

2027 CLASS IV ZONING PERMIT
HOMESTAY RECERTIFICATION APPLICATION FORM

I. NOTICE REGARDING OPERATING WITHOUT A PERMIT

It is unlawful to conduct short-term rentals outside of the Visitor Destination Area "VDA" without a permit. The County of Kaua'i can pursue civil and/or criminal penalties for any unlawful short-term rentals.

II. SOURCES OF AUTHORITY

Please review and refer to Sec. 8-17.8 through 17.12 of the Kaua'i County Code, 1987, as amended, Non-Conforming Structures and Uses (Ord. No. 935) and Ordinance 1002 - Homestays which can be found on the Planning Department's portion of the County's website at: www.kauai.gov/Government/Departments-Agencies/Planning-Department/Transient-Vacation-Rentals under the TVR Ordinances and Rules section.

III. APPLICATION CONTENTS

The most current Homestay Recertification Application Form may be completed and submitted *90 days before but not less than thirty (30) days prior to the recertification date* and will also contain the following documents:

A. Documents showing proof that the primary residential structure(s) used for the homestay operation is the owner's primary residence or that the respective owner is benefitting under Sec. 5A-11 of the K.C.C. for a homeowner's exemption for the homestay site in the year preceding the date of recertification;
B. Copy of unredacted TAT and GET reconciliation statements for the previous tax year clearly reflecting and verifying that tax payments were made; and
C. Documentation that there is at least one 5 lb. multi-purpose A:B:C fire extinguisher mounted near an exit and inspected annually by a fire protection company.
D. If applicable, documents that demonstrate the sales of agricultural goods from the property's farm exceed those sales generated from the property's homestay operation.
E. Additional conditions per Owner's Stipulated Conditions.

Applications and supporting documents may be emailed to **Mlaureta@Kauai.gov**,
but should Owner wish to receive a confirmation of receipt, Owner should send via USPS Return Receipt Requested.

INCOMPLETE APPLICATIONS WILL BE RETURNED TO THE OWNER'S MAILING ADDRESS.

IV. ADDITIONAL NOTICE

A. Properties located within the Flood Zone may be contacted if an inspection is required for renewal;
B. If mailed/delivered, documents submitted shall be on standard sized paper, 8 ½" x 11"; one-sided, no staples
C. All photos shall be dated, labeled with photo content and shall be printed on standard sized paper, 8 ½" x 11";
D. Owners who require proof of submitting their application should mail their complete application via Certified Mail, return receipt requested to the mailing address of the Planning Department listed above;
E. The status of all homestay and TVR permits can be found at: www.kauai.gov/Government/Departments-Agencies/Planning-Department/ Transient-Vacation-Rentals; and
F. Any and all attachments/correspondence with the County shall include the Class IV Zoning Permit #.

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I. CONTACT INFORMATION

Applicant: *Check here if this is a **new** Owner*:* ☐

_____
NAME OF OWNER *(required)*

_____
Contact Name of Owner (First Name) (Last Name)

_____
Owner's Current Mailing Address

_____ _____ _____
City State Zip Code

_____ (_____) _____
Owner's Email Address Owner's Phone Number

24/7 Emergency Contact Person

_____ (_____) _____
Name Phone Number

****If this property is transferred or sold, Seller shall provide the new owner's information to the Planning Department in writing in a reasonable amount of time.***

II. PROPERTY INFORMATION

_____
Class IV Zoning Permit #

_____
Use Permit #

_____
Special Permit # (If applicable)

_____
The Annual Recertification Due Date (MM/DD/YY)

_____
Name of Homestay (if applicable)

_____
Street Address of Property

_____
City Zip code

TMK:

(4) - ___ ___ ___ ___ ___ ___ ___ ___ ___ ___ ___ ___

Provide the valid Transient Accommodation Tax License #

TA - ___ ___ ___ - ___ ___ ___ - ___ ___ ___ ___ - ___ ___
and the name it is filed under:

_____

☐ Initial here that proof of your homeowner's exemption is attached to this application.

III. WEBSITE LINKS

Provide website link(s) that advertises your Homestay. Please highlight your Class IV Zoning Permit # on each site.

_____

_____

_____

I hereby acknowledge that I am in compliance with Ordinance No. 1002. I declare under penalty of perjury that the information I have provided is true and correct. I understand that providing false information may be a violation of Federal and State law.

_____ _____
Print Name Legibly

_____ _____
Signature of Applicant Dated 10/28/2026