Briefly, the requirements for a license are:

1) Registration with the Business Registration Division;
2) Have a good reputation for honesty, truthfulness, financial integrity and fair dealing;
3) Have liability and worker's compensation insurance; and
4) Have in your employ a licensed individual who is designated Responsible Managing Employee (RME).

This is the general licensure process and what you may expect after filing an application:

1) Applicant files application, fee and other required items on or before the 20th day of the month.
2) Board reviews complete applications the following month.
3) Board notifies applicant of approval/disapproval/deferral.
4) Approved applicant's RME registers with a separate testing agency for exam, if applicable.
5) RME takes exam the following month.
6) Upon RME passing the exam, board notifies applicant of license requirements.
7) Applicant submits license requirements.
8) Board issues license to applicant.
9) Maintain license.

APPLICATION FILING DEADLINE

Application, fee and all supporting documents to be presented to the board must be received in the board's Honolulu office on or before the 20th day of the month prior to the scheduled meeting date. The board is scheduled to meet once a month, except for the month of December. Refer to the attached schedule for all dates.

Each application must be submitted with the following items for consideration by the board: FAX COPIES WILL NOT BE ACCEPTED.

- Application fee
- Financial statement
- Credit reports of each officer/partner/manager/member
- Tax clearance
- Trade name registration, if applicable
- RME appointment
- Entity registration

INSTRUCTIONS FOR FILING

APPLICATION

Complete all 3 pages of the application.

Failure to provide all the requested information will delay the processing of your application.

An entity (corporation, partnership, joint venture, LLC or LLP) cannot be issued a license without having in its employ a principal responsible managing employee (RME). The RME must file a separate application form if not already licensed.

FEES

Attach the $50 non-refundable application fee for each application filed. Additional fees will be assessed after board approval. Make checks payable to: COMMERCE AND CONSUMER AFFAIRS.
NOTE: One of the numerous legal requirements that you must meet in order for your new license to be issued is the payment of fees as set forth in this application. You may be sent a license certificate before the payment you sent us for your required fees is honored by your bank. If your payment is dishonored, you will have failed to pay the required licensing fee and your license will not be valid, and you may not do business under that license. Also, a $25.00 service charge shall be assessed for payments that are dishonored for any reason.

If for any reason you are denied the license you are applying for, you may be entitled to a hearing as provided by Title 16, Chapter 201, Hawaii Administrative Rules, and/or Chapter 91 Hawaii Revised Statutes. Your written request for a hearing must be directed to the agency that denied your application, and must be made within 60 days of notification that your application for a license has been denied.

ASBESTOS CONTRACTOR

The contracting entity (corporation, partnership, joint venture, LLC or LLP) shall submit proof of successful completion by the RME, and all asbestos abatement employees of the contracting entity, of Environmental Protection Agency (EPA) or board approved asbestos training courses. RMEs shall have taken a 4-day course; abatement workers shall have taken a 3-day course within two years prior to filing the application.

FINANCIAL STATEMENT

Submit a current financial statement (not more than a year old) prepared and signed by a licensed or certified public accountant holding a current permit to practice. If licensed in another state, provide copy of license. Financial statements prepared by bookkeepers and tax preparers are not acceptable.

SIGNATURE OF APPLICANT IS REQUIRED ON FINANCIAL STATEMENT WHETHER ACCOUNTANT USES OUR FORM OR ITS OWN.

CREDIT REPORT

Submit a current credit report for each officer, partner, manager, or member, (from a credit reporting agency issued not more than 6 months ago) covering at least the previous 5 years. If a partner or member is a business entity, submit business entity's credit report (i.e. Dun & Bradstreet report) or credit reports on the entity's officers.

TAX CLEARANCE

Submit a current Hawaii State Tax Clearance (issued not more than 6 months old) with an original State Department of Taxation stamp. (Not applicable to corporations, partnerships, joint ventures, LLCs or LLPs registered in Hawaii less than 1 year).

TRADE NAME

If you are planning to use a trade name, submit a filed-stamped copy of current trade name registration approved by the Business Registration Division of the Department of Commerce and Consumer Affairs.

ENTITY REGISTRATION:
CORPORATION/PARTNERSHIP
LLC or LLP

All entities must be properly registered with the Business Registration Division (BREG), Department of Commerce and Consumer Affairs, State of Hawaii, P.O. Box 40, Honolulu, Hawaii 96810. (Please call them for the proper forms at (808) 586-2727) or visit their website at: www.businessregistrations.com/home.html to order Certificates of Good Standing, forms, etc.

If the entity has been registered in this state for LESS THAN ONE (1) YEAR, ATTACH a “filed-stamped” copy of the document filed with BREG; or the same certificate mentioned below.

If the entity has been registered in this state for MORE THAN ONE (1) YEAR, ATTACH a current “Certificate of Good Standing” issued not more than 1 year ago.

RME/ENTITY APPOINTMENT

RME not licensed in Hawaii: RME must file a separate application.

RME licensed in Hawaii: Have RME submit a letter confirming employment with applicant and confirming termination of present status. If the applicant does not request to be licensed with all of the RME’s active classes, those classes will be placed on inactive status.
**RME/ENTITY APPOINTMENT**

Sole proprietor licensed in Hawaii and incorporating, forming a partnership, LLC or LLP: **Submit** a letter with the application stating change in status from sole proprietor to RME of new entity. After licensure, both the entity and RME licenses must be maintained.

**LAWS AND RULES**

A copy of the Contractors laws and rules may be obtained by submitting a written request to: Contractors License Board, DCCA, P.O. Box 3469, Honolulu, Hawaii 96801. Chapter 436B, Hawaii Revised Statutes, the Professional and Vocational Licensing Act should be read in conjunction with the above statutes.

The laws and rules are also available on our website at: www.hawaii.gov/dcca/areas/pvl. Click on "Contractors". Then click on "Statute/Rule Chapter" in the yellow box on the right.

**BOARD’S ADDRESS**

Mail the completed application, proper fee amount and other required documents to:

Contractors License Board
DCCA, PVL Licensing Branch
P.O. Box 3469
Honolulu, HI 96801

Deliver to office location at:
335 Merchant St., Room 301
Honolulu, HI 96813

Phone: (808) 586-3000

This material can be made available for individuals with special needs. Please call the Licensing Branch Manager at (808) 586-3000 to submit your request.
<table>
<thead>
<tr>
<th>Application Filing Deadline</th>
<th>Board Meeting</th>
<th>Prometric Filing Deadline</th>
<th>Prometric Examination Dates</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>NO BOARD MEETING IN DECEMBER</strong></td>
<td>January 11, 2008</td>
<td>January 24**, 25*, 2008</td>
<td></td>
</tr>
<tr>
<td>March 20, 2008</td>
<td>April 18, 2008</td>
<td>May 9, 2008</td>
<td>May 22**, 23*, 2008</td>
</tr>
</tbody>
</table>

**NO BOARD MEETING IN DECEMBER**

* *All Islands (includes Oahu)*

** Oahu only
CLASSIFICATIONS AS LISTED IN CHAPTER 77
HAWAII ADMINISTRATIVE RULES

"A"  General Engineering
"B"  General Building
C-1  Acoustical and insulation contractor;
C-2  Mechanical insulation contractor;
C-3  Asphalt paving and surfacing contractor;
C-3a  Asphalt concrete patching, sealing, and striping contractor;
C-3b  Play court surfacing contractor;
C-4  Boiler, hot-water heating, and steam fitting contractor;
C-5  Cabinet, millwork, and carpentry remodeling and repairs contractor;
C-5a  Garage door and window shutters contractor;
C-5b  Siding application contractor;
C-6  Carpentry framing contractor;
C-7  Carpet laying contractor;
C-9  Cesspool contractor;
C-10  Scaffolding contractor;
C-12  Drywall contractor;
C-13  Electrical contractor;
C-14  Sign contractor;
C-15  Electronic systems contractor;
C-15a  Fire and burglar alarm contractor;
C-15b  Telecommunications contractor;
C-16  Elevator contractor;
C-16a  Conveyor systems contractor;
C-17  Excavating, grading, and trenching contractor;
C-19  Asbestos contractor;
C-20  Fire protection contractor;
C-20a  Fire repressant systems contractor;
C-21  Flooring contractor;
C-22  Glazing and tinting contractor;
C-22a  Glass tinting contractor;
C-23  Gunite contractor;
C-24  Building moving and wrecking contractor;
C-25  Institutional and commercial equipment contractor;
C-27  Landscaping contractor;
C-27a  Hydro mulching contractor;
C-27b  Tree trimming and removal contractor;
C-31  Masonry contractor;
C-31a  Cement concrete contractor;
C-31b  Stone masonry contractor;
C-31c  Refractory contractor;
C-31d  Tuckpointing and caulking contractor;
C-31e  Concrete cutting, drilling, sawing, coring, and pressure grouting contractor;
C-32  Ornamental, guardrail, and fencing contractor;
C-32a  Wood and vinyl fencing contractor;
C-33  Painting and decorating contractor;
C-33a  Wall coverings contractor;
C-33b  Taping contractor;
C-33c  Surface treatment contractor;
C-34  Soil stabilization contractor;
C-35  Pile driving, pile and caisson drilling, and foundation contractor;
C-36  Plastering contractor;
C-36a Lathing contractor;
C-37  Plumbing contractor;
C-37a Sewer and drain line contractor;
C-37b Irrigation and lawn sprinkler systems contractor;
C-37c Vacuum and air systems contractor;
C-37d Water chlorination and sanitation contractor;
C-37e Treatment and pumping facilities contractor;
C-37f Fuel dispensing contractor;
C-38  Post tensioning contractor;
C-40  Refrigeration contractor;
C-40a Prefabricated refrigerator panels contractor;
C-41  Reinforcing steel contractor;
C-42  Roofing contractor;
C-42a Aluminum and other metal shingles contractor;
C-42b Wood shingles and wood shakes contractor;
C-42c Concrete and clay tile contractor;
C-42e Urethane foam contractor;
C-42g Roof coatings contractor;
C-43  Sewer, sewage disposal, drain, and pipe laying contractor;
C-43a Reconditioning and repairing pipeline contractor;
C-44  Sheet metal contractor;
C-44a Gutters contractor;
C-44b Awnings and patio cover contractor;
C-48  Structural steel contractor;
C-48a Steel door contractor;
C-49  Swimming pool contractor;
C-49a Swimming pool service contractor;
C-49b Hot tub and pool contractor;
C-51  Tile contractor;
C-51a Cultured marble contractor;
C-51b Terrazo contractor;
C-52  Ventilating and air conditioning contractor;
C-53  Miscellaneous retail products;
C-54  Interior design;
C-55  Waterproofing contractor;
C-56  Welding contractor;
C-57  Well contractor;
C-57a Pumps installation contractor;
C-57b Injection well contractor;
C-60  Solar power systems contractor;
C-61  Solar energy systems contractor;
C-61a Solar hot water systems contractor;
C-61b Solar heating and cooling systems contractor;
C-62  Pole and line contractor;
C-62a Pole contractor;
C-63  High voltage electrical contractor; and
C-68  Classified specialist.
LICENSE REQUIREMENTS
Upon Receiving Board Approval

WORKER’S COMPENSATION INSURANCE
Worker’s Compensation - Submit a certificate of worker’s compensation insurance from an insurance company authorized to do business in this State, and a statement from the insurance carrier that the board will be notified of any withdrawal, termination, or cancellation of the insurance.

Partnerships with NO employees may file a form prescribed by the board, in lieu of worker’s compensation insurance.

LLC’s with no employees may file written verification of exclusion from the State Dept of Labor and Industrial Relations in lieu of workers’ compensation insurance.

Corporations may file a form prescribed by the board in lieu of worker’s compensation insurance WHEN the RME owns at least 50% of the corporation and there are NO OTHER EMPLOYEES.

Joint Ventures must file worker’s compensation certificates.

LIABILITY AND PROPERTY DAMAGE INSURANCE
Submit a certificate of insurance from an insurance company or agency authorized to do business in this State, showing full policy coverage of the applicant for comprehensive bodily injury and property damage liability with the following minimum limits of liability:

<table>
<thead>
<tr>
<th>Liability Type</th>
<th>Minimum Limits</th>
</tr>
</thead>
<tbody>
<tr>
<td>Bodily Injury Liability</td>
<td>$100,000 each person</td>
</tr>
<tr>
<td></td>
<td>$300,000 each occurrence</td>
</tr>
<tr>
<td>Property Damage Liability</td>
<td>$50,000 each occurrence</td>
</tr>
</tbody>
</table>

OUT-OF-STATE CONTRACTORS: The Board will accept liability insurance from a non-admitted carrier, if the producer qualifies for an exemption under HRS §431:9A-104(b)(6).

PLACE OF BUSINESS
A licensed contractor shall have and maintain a definite place of business where the licensee may be served notice and legal process in the State and shall display therein the contractor’s license. Post Office Box number is not accepted as a place of business.

FEES
License fees will be due. Specific amounts will be given at the appropriate time.

ENTITY-RME DEPENDENCY
A corporation, partnership, joint venture, LLC or LLP cannot be issued a license without having in its employ a responsible managing employee (RME). The entity must file a separate application from the RME and both must pay separate fees in order to be licensed.

ATTENTION: CONTRACTORS APPLYING FOR ELECTRICAL OR PLUMBING RELATED CLASSIFICATIONS
Please be advised that in order to perform electrical or plumbing work in Hawaii, an individual must also obtain an electrician (ie. ES or EJ) or plumber (PM or PJ) license OR hire someone with the appropriate license to perform the work. (Refer to Hawaii Revised Statutes Chapter 448E). YOU MAY NEED THIS TYPE OF LICENSE TO GET A BUILDING PERMIT.
MAINTAINING THE LICENSE

MAINTAIN INSURANCE

Maintain insurance coverage throughout licensure and keep on file in the board's office evidence of such coverage.

*Failure to maintain liability and worker's compensation coverages causes automatic forfeiture of license, and if continuous coverage is not reinstated within sixty days, shall require the entity and RME to apply as a new applicant.*

ENTITY-RME DEPENDENCY

If for any reason the Responsible Managing Employee leaves the contracting entity, the contracting entity must notify the board within 60 days and file an application for a new RME or place the entity's license on inactive status within 90 days of RME leaving contracting entity. Failure to notify the board and apply for a new RME or place the license on inactive status within the required time period causes the license to be **FORFEITED** automatically.

PLACE OF BUSINESS

Maintain a place of business.

BIENNIAL RENEWAL

All licenses, regardless of issuance date, are subject to renewal by **September 30 of each even-numbered year**. To ensure receipt of a renewal application, keep the board informed of your address. Applications are sent by mail around August 1, even-numbered years. Licenses not renewed by September 30 are forfeited and the holders of a forfeited license are considered unlicensed and may not practice. Restorations of forfeited licenses are accepted until November 30 of the even-numbered year with a penalty fee. After November 30, restoration is not accepted and a new application for a license is required.
APPLICATION FOR CONTRACTOR’S LICENSE – ENTITY

Access this form via website at: www.hawaii.gov/dcca/areas/pvl

INSTRUCTIONS - To avoid delay read all instructions carefully.
Each applicable question must be fully and truthfully answered. Any material misrepresentation is grounds for refusal or subsequent revocation of license.

Attach sheets to this application when so instructed or where the space provided for the answer is not sufficient.

Answer all questions. No license will be considered until this application is completed. If a question is not applicable, indicate with "NA."

Applications must be printed legibly in black ink or typewritten.
The required $50.00 application fee must be attached and submitted with this application form.

(A) Indicate the type of application being made:
[ ] Corporation [ ] LLC  [ ] Joint Venture
[ ] Partnership [ ] LLP

(B) Name of Applicant
(Name of corporation, partnership, joint venture, LLC or LLP as registered with BREG)

- Name of Responsible Managing Employee (RME)
- License No. or Date Applied for License:

(C) Trade Name or Business Name (if any)

(D) Phone: (days) (  )

Federal Employer Identification No.:

(E) Mailing Address
(Street address or P. O. Box, City, State, Zip Code)

- Hawaii Business Address
(Street address, City, Zip Code – P.O. Box is not acceptable)

(F) PERSONNEL OF APPLICANT – If applicant is:

<table>
<thead>
<tr>
<th>Corporation</th>
<th>LIMITED LIABILITY COMPANY (LLC)</th>
<th>PARTNERSHIP/JOINT VENTURE/LLP</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Provide information on:</td>
<td></td>
</tr>
<tr>
<td></td>
<td>all the OFFICERS and the RME</td>
<td></td>
</tr>
<tr>
<td></td>
<td>all the MANAGERS/MEMBERS and the RME</td>
<td></td>
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<tr>
<td></td>
<td>all the PARTNERS and the RME</td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Full Name (First-Middle-Last)</th>
<th>Title or Position</th>
<th>Residence Address</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

(G) Set forth in detail the kind of contracting business in which the applicant intends to engage:

(H) Classification(s) requested (  )
Symbol - See list attached
Name of classification

FOR OFFICE USE ONLY

Financial Statement
Tax Clearance
BREGS
RME Appointment

Appl ..................115 ................ $ 50 Entity: Lic..............116 ................ $200
RF ..................908 ................ $150
EF ..................909 ................ $ 10
CRF .................117 ................ $ 55/$110
1/2 Ren ............100 ................ $ 75
Service Charge .......BCF ................ $ 25

Page 1 of 3 Contractors License Application – ENTITY

CT-01 1107R
(I) EACH QUESTION MUST BE ANSWERED

1. Has the entity previously applied for a Hawaii State contractor's license? .............................................................. YES NO
   If yes, state month and year ____________________________________________

2. Provide name, classification, number, date and copy of each contractor's license previously held in any state by the applicant, any person listed under "Personnel of Applicant", or by any organization in which any such person was a copartner or corporate officer, manager, or member. ____________________________________________

3. Has any person listed under "Personnel of Applicant", been affiliated with a contracting entity whose license has been terminated due to issuance of a court order authorizing payment from the Contractors Recovery Fund of this state or any other state? ____________________________________________
   If yes, submit a detailed statement giving the date of the order and circumstances leading up to issuance of the court order.

4. Has the applicant, any person listed under "Personnel of Applicant", or any construction organization in which any such person was a member of the personnel, had a contractor's license or any professional or vocational license denied, fined, suspended or revoked by this state or any other state? ____________________________ If yes, attach a detailed statement signed by you.
   (For the purpose of this question, "denied" does not mean that one has previously failed an examination.)

5. Has any bonding or surety company ever completed or made a financial settlement upon any construction contract or work undertaken by the applicant, any person listed under "Personnel of Applicant", or any construction organization in which any such person was a member of the personnel? ____________________________ If yes, attach a detailed statement signed by you.

6. Are there now any unpaid past due bills or claims for labor, materials, or services, outstanding and unsatisfied, as a result of the operations of the applicant, any person listed under "Personnel of Applicant", or any construction organization in which any such person was a member of personnel? ____________________________ If yes, attach a detailed statement signed by you.

7. Are there now any liens, suits, or judgments of record or pending, outstanding and unsatisfied, as a result of the operations of the applicant, any person listed under "Personnel of Applicant", or any construction organization in which any such person was a member of the personnel? ____________________________ If yes, attach a detailed statement signed by you explaining the circumstances and current status, and if no payment or payment arrangement has been made, the reason; a resume of employment and business activities; and copies of the court complaint, judgment, documentation of payment arrangements, lien documents, records of any payments, and other documents.

8. Has the applicant, any person listed under "Personnel of Applicant", or any construction organization in which any such person was a member of the personnel ever been adjudicated as bankrupt, or is presently in the process of bankruptcy proceedings? ____________________________ If yes, attach a detailed statement giving the number of bankruptcy proceedings, the location of the bankruptcy court, a schedule of creditors listed in the bankruptcy petition, the approximate date of the action and a statement of the final action upon the proceedings.

9. Has the applicant, any person listed under "Personnel of Applicant", or any construction organization in which any such person was a member of the personnel ever made an assignment of assets, either voluntary or otherwise, in settlement of construction obligations for less than the total amount of the indebtedness? ____________________________ If yes, attach a detailed statement listing names and addresses of all creditors and losses they sustained.

10. Has any person listed under "Personnel of Applicant" ever been convicted of a felony which has not been annulled or expunged within the last 20 years? ________________
    If yes, attach a statement signed by you explaining the circumstances leading to the conviction and detailing all activities since the conviction, including employment and business involvements. Include job title, periods of employment, employer's name, description of duties, and training attended. Also, attach certified court documentation on the date, place, violation of each conviction and fulfillment of conditions of each sentence.
I hereby certify that the statements, answers, and representations made in this application and in the documents attached are true and correct. I understand that any misrepresentation is grounds for refusal or subsequent revocation of license and is a misdemeanor (Section 710-1017, Sections 436B-19 and 444-17, Hawaii Revised Statutes).

I further certify that I have read and will abide by the provisions of Hawaii Revised Statutes, Chapter 444 and Hawaii Administrative Rules, Chapter 77.

Partner, officer of a
Corporation, manager or member of LLC

________________________________________  __________________________________________
Date                                               Signature
Title

________________________________________  __________________________________________
Date                                               Signature
Title

________________________________________  __________________________________________
Date                                               Signature
Title

________________________________________  __________________________________________
Date                                               Signature
Title

This material can be made available for individuals with special needs. Please call the Licensing Branch Manager at (808) 586-3000 to submit your request.
## CONTRACTORS FINANCIAL STATEMENT

(Prescribed Form)

Financial Statement as of ________________________, 20___ (not more than one year old) is for:  
Name of Applicant: ________________________________  
(Sole Proprietor, Corporation, Partnership, Joint Venture, LLC, LLP)

Note: The name listed on this financial statement must be exactly the same name listed on your application under "Name of Applicant".

### ASSETS:

<table>
<thead>
<tr>
<th>Category</th>
<th>Amount</th>
</tr>
</thead>
<tbody>
<tr>
<td>CURRENT ASSETS:</td>
<td></td>
</tr>
<tr>
<td>Cash (include checking account)</td>
<td></td>
</tr>
<tr>
<td>Savings account</td>
<td></td>
</tr>
<tr>
<td>Time certificates (within 1 year)</td>
<td></td>
</tr>
<tr>
<td>Deposit with bids</td>
<td></td>
</tr>
<tr>
<td>Accounts receivable (completed contracts)</td>
<td></td>
</tr>
<tr>
<td>Earned estimated and retainage (uncompleted contracts)</td>
<td></td>
</tr>
<tr>
<td>Other accounts receivable</td>
<td></td>
</tr>
<tr>
<td>Work in progress (unbilled)</td>
<td></td>
</tr>
<tr>
<td>Notes receivable</td>
<td></td>
</tr>
<tr>
<td>Stocks and bonds</td>
<td></td>
</tr>
<tr>
<td>Life insurance (cash value)</td>
<td></td>
</tr>
<tr>
<td>Other current assets</td>
<td></td>
</tr>
<tr>
<td>TOTAL CURRENT ASSETS</td>
<td></td>
</tr>
</tbody>
</table>

| OTHER ASSETS:                                                            |                |
| Material in stock (not included in any items above)                      |                |
| inventory or other materials                                             |                |
| Other assets                                                             |                |
| TOTAL OTHER ASSETS                                                       |                |

| FIXED ASSETS:                                                           |                |
| Equipment at net book value                                             |                |
| Real estate                                                             |                |
| Furniture and fixtures at net book value                                 |                |
| Tools                                                                    |                |
| Other fixed assets                                                      |                |
| TOTAL FIXED ASSETS                                                      |                |

| TOTAL ASSETS                                                            |                |

### CURRENT LIABILITIES:

<table>
<thead>
<tr>
<th>Category</th>
<th>Amount</th>
</tr>
</thead>
<tbody>
<tr>
<td>Notes payable (due within one year):</td>
<td></td>
</tr>
<tr>
<td>To banks regular</td>
<td></td>
</tr>
<tr>
<td>To material men</td>
<td></td>
</tr>
<tr>
<td>To other (exclusive of Equipment)</td>
<td></td>
</tr>
<tr>
<td>TOTAL NOTES PAYABLE</td>
<td></td>
</tr>
</tbody>
</table>

| LIABILITIES:                                                            |                |
| Account payable:                                                        |                |
| Subcontractors                                                           |                |
| Material men                                                            |                |
| Others                                                                  |                |
| TOTAL CURRENT LIABILITIES                                               |                |

### LONG-TERM LIABILITIES:

<table>
<thead>
<tr>
<th>Category</th>
<th>Amount</th>
</tr>
</thead>
<tbody>
<tr>
<td>Long-term debt (less portion due within one year)</td>
<td></td>
</tr>
<tr>
<td>Encumbrances on equipment (due after 1 year)</td>
<td></td>
</tr>
<tr>
<td>Encumbrances on real estate</td>
<td></td>
</tr>
<tr>
<td>Billings in excess of cost on uncompleted contracts</td>
<td></td>
</tr>
<tr>
<td>Other long-term liabilities (Specify):</td>
<td></td>
</tr>
<tr>
<td>TOTAL LONG-TERM LIABILITIES</td>
<td></td>
</tr>
</tbody>
</table>

### NET WORTH:

<table>
<thead>
<tr>
<th>Category</th>
<th>Amount</th>
</tr>
</thead>
<tbody>
<tr>
<td>Capital stock (if corporation, show shares authorized, issued-par value)</td>
<td></td>
</tr>
<tr>
<td>Surplus</td>
<td></td>
</tr>
<tr>
<td>TOTAL NET WORTH</td>
<td></td>
</tr>
</tbody>
</table>

This statement must be signed, whether accountant uses this form or his own.

I hereby certify as owner, officer, partner, manager, member or R.M.E. that the statements contained on this statement are true and correct. I certify that any misrepresentation is grounds for refusal or subsequent revocation of license and is a misdemeanor (Sec. 710-1017, Sections 436B-19, and 444-17, Hawaii Revised Statutes).

SIGNATURE OF APPLICANT: ________________________________

TITLE (owner, president, etc.): ________________________________

In the opinion of the undersigned, the above statement fairly presents, on the date indicated, the financial condition of the applicant. The undersigned has no interest in the above enterprise.

SIGNATURE OF C.P.A. or P.A.: ________________________________

LICENSE NUMBER: ________________________________

PRINT NAME: ________________________________

STATE: ________________________________

SHALL BE PREPARED AND SIGNED BY A LICENSED PUBLIC ACCOUNTANT OR CERTIFIED PUBLIC ACCOUNTANT HOLDING A CURRENT PERMIT TO PRACTICE. IF LICENSED IN ANOTHER STATE, PROVIDE COPY OF A CURRENT LICENSE. Note: Financial Statements prepared by bookkeepers and tax preparers are not acceptable.