AGRIBUSINESS DEVELOPMENT CORPORATION
ADC Licensing Program
235 South Beretania Street, Room 205
Honolulu, HI 96813
Phone: 808-586-0186
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EXPRESSION OF INTEREST

Note: For entries on more than one island/district, this form may be photocopied.

I am interested in a License for agricultural land managed by the State of Hawaii, Agribusiness Development Corporation (ADC):

Location Desired: Island: _____ District: _____

Acres (check one): ☐ 5 to 10 ☐ 10 to 20 ☐ More than 20 _____ (Specify)

Type of farming (check one) ☐ Field Crops ☐ Flowers/Foliage ☐ Orchard ☐ Aquaculture ☐ Other _____ (Specify)

AGRICULTURAL EXPERIENCE: No. of years _____ Describe: _____

GENERAL BACKGROUND INFORMATION:

Are you a citizen of the United States who has resided in Hawaii for at least three years, or a permanent-status alien who has resided in Hawaii for at least five (5) years? Yes___ No___

Have you had a previous sale, lease, license, permit, or easement covering public lands canceled for failure to satisfy the terms and conditions in the last five years? Yes___ No___
If Yes, please explain _____

Have you been in arrears in payment of taxes or other financial obligations to the State of Hawaii or to any of its counties? Yes___ No___ If Yes, please explain _____

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