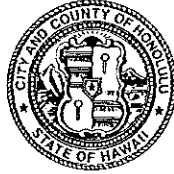


DEPARTMENT OF CUSTOMER SERVICES
CITY AND COUNTY OF HONOLULU
DIVISION OF MOTOR VEHICLE, LICENSING AND PERMITS
ADMINISTRATION
P.O. BOX 30300
HONOLULU, HAWAII 96820-0300

PETER B. CARLISLE
MAYOR



GAIL Y. HARAGUCHI
DIRECTOR

DENNIS A. KAMIMURA
LICENSING ADMINISTRATOR

July 29, 2011

Ms. Laurie A. Temple
Staff Attorney
American Civil Liberties Union of Hawaii
Post Office Box 3410
Honolulu, Hawaii 96801

Dear Ms. Temple:

I have enclosed the Notice To Requester form together with Rule 30.17(d), Rules and Regulations of the Director of Finance.

If you have any questions, you may contact me at 532-7793 or email:
dkamimura@honolulu.gov.

Sincerely,

A handwritten signature in black ink, appearing to read "Dennis A. Kamimura".

DENNIS A. KAMIMURA
Licensing Administrator

Enclosures

NOTICE TO REQUESTER

(Use multiple forms if necessary)

TO: LAURIE A. TEMPLE, AMERICAN CIVIL LIBERTIES UNION OF HAWAII

FROM: DENNIS A. KAMIMURA, LICENSING ADMINISTRATOR
DIVISION OF MOTOR VEHICLE, LICENSING AND PERMITS
Phone: (808) 532-7793; email: dkamimura@honolulu.gov
(Agency/name & telephone number of contact person at agency)

DATE REQUEST RECEIVED: July 12, 2011

DATE OF THIS NOTICE: July 29, 2011

GOVERNMENT RECORDS YOU REQUESTED (attach copy of request or provide brief description below):
Any rules, regulations, policies and/or practices related to amending or omitting the gender marker on a driver's license issued by the City and County of Honolulu.

NOTICE IS PROVIDED TO YOU THAT YOUR REQUEST:

Will be granted in its entirety.

Cannot be granted because

Agency does not maintain the records. Agency believed to maintain records: _____

Agency needs a further description or clarification of the records requested. Please contact the agency and provide the following information: _____

Request requires agency to create a summary or compilation from records not readily retrievable.

Is denied in its entirety

Will be granted only as to certain parts

based upon the following exemption provided in HRS § 92F-13 and/or § 92F-22 and other laws cited below (portions of records that agency will not disclose should be described in general terms).

RECORDS OR
INFORMATION WITHHELD

APPLICABLE
STATUTES

AGENCY
JUSTIFICATION

REQUESTER'S RESPONSIBILITIES:

You are required to (1) pay any lawful fees assessed; (2) make any necessary arrangements with the agency to inspect, copy or receive copies as instructed below; and (3) provide the agency any additional information requested. If you do not comply with the requirements set forth in this notice within 20 business days after the postmark date of this notice or the date the agency makes the records available, you will be presumed to have abandoned your request and the agency shall have no further duty to process your request. Once the agency begins to process your request, you may be liable for any fees incurred. If you wish to cancel or modify your request, you must advise the agency upon receipt of this notice.

METHOD & TIMING OF DISCLOSURE:

Records available for public access in their entireties must be disclosed within a reasonable time, not to exceed 10 business days, or after receipt of any prepayment required. Records not available in their entireties must be disclosed

within 5 business days of this notice or after receipt of any prepayment required. If incremental disclosure is authorized by HAR § 2-71-15, the first increment must be disclosed within 5 business days of this notice or after receipt of any prepayment required.

Method of Disclosure:

- Inspection at the following location: _____.
- As requested, a copy of the record(s) will be provided in the following manner:
 - Available for pick-up at the following location: _____.
 - Will be mailed to you.
 - Will be transmitted to you by other means requested:

Timing of Disclosure: All records, or first increment where applicable, will be made available or provided to you:

- The first increment is attached to this response.
- After prepayment of fees and costs of \$ _____ (50% of fees + 100% of costs, as estimated below).
Payment may be made by cash or: personal check other _____.

For incremental disclosures, each subsequent increment will be disclosed within 20 business days after:

- The prior increment (if one prepayment of fees is required and received).
- Receipt of each incremental prepayment required.

Disclosure is being made in increments because the records are voluminous and the following extenuating circumstances exist:

- Agency must consult with another person to determine whether the record is exempt from disclosure under HRS chapter 92F
- Request requires extensive agency efforts to search, review, or segregate the records or otherwise prepare the records for inspection or copying.
- Agency requires additional time to respond to the request in order to avoid an unreasonable interference with its other statutory duties and functions.
- A natural disaster or other situation beyond agency's control prevents agency from responding to the request within 10 business days.

ESTIMATED FEES & COSTS:

The agency is authorized to charge you certain fees and costs to process your request (even if no record is subsequently found to exist), but must waive the first \$30 in fees assessed for general requesters and the first \$60 in fees when the agency finds that the request made is in the public interest. See HAR §§ 2-71-19, -31 and -32. The agency may require prepayment of 50% of the total estimated fees and 100% of the total estimated costs prior to processing your request. The following is the estimate of the fees and costs that the agency will charge you, with the applicable waiver amount deducted:

Fees: Search	Estimate of time to be spent: (\$2.50 for each 15-minute period)	\$
Review & segregation	Estimate of time to be spent: (\$5.00 for each 15-minute period)	\$
Fees waived	<input type="checkbox"/> general (\$30) <input type="checkbox"/> public interest (\$60)	<\$ 0 ____>
Other	_____ (Pursuant to HAR § 2-7-31(B))	\$
Total Estimated Fees:		\$

Costs: Copying Estimate of # of pages to be copied: 11 \$ _____
(@ \$ _____ per page.)

Other _____

\$ _____

Total Estimated Costs:

\$ _____

For questions about this notice, please contact the person named above. Questions regarding compliance with the UIPA may be directed to the Office of Information Practices at 808-586-1400 or oiip@hawaii.gov.

REQUEST TO ACCESS A GOVERNMENT RECORD

DATE: July 8, 2011

TO: City and County of Honolulu Department of Customer Services, 550 South King St., Honolulu, HI 96813

FROM: Laurie A. Temple
Name or Alias
ACLU of Hawaii, P.O. Box 3410, Honolulu, HI 96801
Phone: (808) 522-5905 e-mail: lt@acluhawaii.org
Contact Information

Although you are not required to provide any personal information, you should provide enough information to allow the agency to contact you about this request. The processing of this request may be stopped if the agency is unable to contact you. Therefore, please provide any information that will allow the agency to contact you (name or alias, telephone or fax number, mailing address, e-mail address, etc.).

I WOULD LIKE THE FOLLOWING GOVERNMENT RECORD:

Describe the government record as specifically as possible so that it can be located. Try to provide a record name, subject matter, date, location, purpose, or names of persons to whom the record refers, or other information that could help the agency identify the record. A complete and accurate description of the government record you request will prevent delays in locating the record. Attach a second page if needed.

- Any rules, regulations, policies and/or practices related to amending or omitting the gender marker on a driver's license issued by the City and County of Honolulu.

I WOULD LIKE: (please check one or more of the options below)

- To inspect the government record.
- A copy of the government record: (Please check one of the options below.) See the back of this page for information about fees that you may be required to pay for agency services to process your record request. Note: Copying and transmission charges may also apply to certain options.
- Pick up at agency (date and time): _____
- Mail
- Fax (toll free and only if available)
- Other, if available (please specify): _____
- If the agency maintains the records in a form other than paper, please advise in which format you would prefer to have the record.
- Electronic Audio Other (please specify): However the records are maintained
- Check this box if you are attaching a request for waiver of fees in the public interest (see waiver information on back).

SEE BACK FOR IMPORTANT INFORMATION

FEES FOR PROCESSING RECORD REQUESTS

You may be charged fees for the services that the agency must perform when processing your record request, including fees for making photocopies and other lawful fees. **The first \$30 of fees charged for searching for a record, reviewing, and segregating will not be charged to you. Any amount over \$30 will be charged to you.** Fees are as follows:

Search for a Record	\$2.50 for 15 minutes
Review and Segregation of a Record	\$5.00 for 15 minutes

WAIVER OF FEES IN THE PUBLIC INTEREST

Up to \$60 of fees for searching for, segregating and reviewing records may be waived when the waiver would serve the public interest as described in section 2-71-32, Hawaii Administrative Rules. If you wish to apply for a waiver of fees in the public interest, you must attach to this request a statement of facts, including your identity as the requester, to show how the waiver of fees would serve the public interest. The criteria for this waiver, found at section 2-71-32, Hawaii Administrative Rules, are:

- (1) The requested record pertains to the operations or activities of an agency;
- (2) The record is not readily available in the public domain; and
- (3) The requester has the primary intention and the actual ability to widely disseminate information from the government record to the public at large.

AGENCY RESPONSE TO YOUR REQUEST FOR ACCESS

The agency to which you addressed your request must respond within a set time period. The agency will normally respond to you within 10 business days from the date it receives your request; however, in *extenuating circumstances* the agency must respond within 20 business days from the date of your request. If you have questions about the response time, you may contact the agency's UIPA contact person. If you are not satisfied with the agency's response, you may call the Office of Information Practices at 808-586-1400.

REQUESTER'S RESPONSIBILITIES

You have certain responsibilities under §2-71-16, Hawaii Administrative Rules. You may obtain a copy of these rules from the Lieutenant Governor's Office or from the Office of Information Practices. These responsibilities include making arrangements to inspect and copy records, providing further clarification or description of the requested record as instructed by the agency's notice, and making a prepayment of fees, if assessed.

ACLU of Hawaii Foundation Request to Access Government Records

Request for Waiver of Fees in the Public Interest

July 8, 2011

Pursuant to section 2-71-32 of the Hawaii Administrative Rules, the American Civil Liberties Union of Hawaii Foundation ("ACLU") hereby requests a waiver of \$60 of the fees that may be assessed under section 2-71-31. The ACLU is a nonprofit, public-interest law firm; our mission is to protect individual freedoms guaranteed under the federal and state constitutions. The ACLU has been engaged in legal action and public education in Hawaii since 1965 on issues affecting constitutional rights.

Public dissemination of the information contained in these documents will contribute significantly to public knowledge and understanding of the City and County of Honolulu's policies regarding gender markers and the effects of those policies on transgendered individuals. The ACLU has no commercial interest in the documents requested. These documents are not readily available in the public domain. As a public-interest organization, the ACLU has both the primary intention and the actual ability to disseminate widely this information to the public at large.

Requester respectfully asks that, if the total fees for this request (including copying charges) are anticipated to exceed \$50.00, Respondent notify Requester and obtain express written permission to proceed with the request.