

Small Business Survey

Impact of Proposed Amendment to Chapter 19-16.1 Hawaii Administrative Rules
Airport System Fees and Charges Applicable to Non-Signatory Carriers

Please fill out the survey, below, and fax to (808) 838-8753 or mail to:

State of Hawaii, DOT, Airports Division
Attn: Ross Smith
400 Rodgers Blvd, Suite 700
Honolulu, HI 96819

Name of Business _____

Airport(s) Served _____

Primary Business Activity: Charter Air Tour Commuter FBO Other
(specify) _____

Make, Model, Max Landing Weight of each Aircraft owned/operated:

1) _____ 2) _____ 3) _____

4) _____ 5) _____ 6) _____

1. Do you believe your business will be impacted by the proposed amended rule?

No

Yes

2. If Yes (above), what will be the impact on your business?

a. Direct increase in operating costs:

No

Yes (please explain):

b. Increase in administrative costs:

No

Yes (please explain):

c. Cost recovery:

Passed on to customers

Absorbed by business

d. Will any increased costs impact your customer base?

No change expected.

Expect fewer customers . Please quantify:

e. Will the proposed rule changes affect your business planning?

No

Yes (please explain):

3. Comments:
