

QUESTIONNAIRE FOR SELF-EMPLOYED INDIVIDUALS

Last Name, First, MI	Social Security No.
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INSTRUCTIONS FOR COMPLETING THIS FORM: Please read each item carefully and answer as completely as possible. The information you provide will be used to determine your eligibility for Disaster Unemployment Assistance (DUA) benefits as an unemployed self-employed individual. Additional information may be requested by a claims examiner. Incomplete, vague, or missing information will delay the determination or may result in a denial of benefits.

SECTION A. BUSINESS INFORMATION

1. Name of business and dba: _____

2. Business Address: _____

Check here if above address is the same as your residence.

3. Telephone: Business: () _____ FAX: () _____

4. Type of business: Sole Proprietor Partnership

5. a. Describe briefly the nature of your self-employment (e.g., dairy farm, general contractor, restaurant, etc.). If you raise crops, list the type of crops and number of acres; if you raise livestock, list the number of each type.

b. How long have you been performing services in the above self-employment? _____

6. a. Describe your regular and customary activities/services performed in connection with your self-employment:

b. What is your normal workweek? _____ Hours per day _____ Days per week

7. Prior to the disaster, did your business receive revenue or income from an entity in the major disaster area which was damaged, destroyed, or closed by the government in response to the disaster? YES NO
If YES, provide the source and percentage of income from each entity (totaling 100%).

<u>Entity Name and Address</u>	<u>% of Revenue</u>
_____	_____
_____	_____
_____	_____
_____	_____

SECTION B. IMPACT OF DISASTER

8. a. Nature and extent of damage to your business/farm caused by the disaster:

- b. How did this damage affect your business/farm?

- c. How was your self-employment income affected by the major disaster?

9. a. After the disaster, which of the activities/services in #6a. above, have you been able to perform?

- b. Date you resumed these activities/services: _____ Time spent: _____ Hours per day: _____ Days per week: _____
- c. Explain why you are unable to perform the other activities/services:

10. a. Was the business closed during the disaster?..... Yes No
b. If the business was closed, did you reopen the business after the disaster? Yes No
c. If YES, on what date: _____
d. If NO, what is the expected date of reopening: _____
11. a. After the disaster, were you able to reach the place of business/farm? Yes No
b. If NO, provide the reason why you were unable to reach the place of business/farm:

- c. Date the place of business/farm was accessible: _____
d. Date you first reached the place of business/farm after the disaster: _____
12. Answer these questions if you have employees (excluding yourself):
a. Number of employees employed by your business: _____
b. Number recalled after the disaster: _____
c. Date recalled: _____
d. Kind of work they are performing after the disaster: _____

13. If you were planning to start your own business but were unable to do so because of the disaster, what date were you supposed to start and what impact did the disaster have on your plans? Describe:

CERTIFICATION: I certify that the information I have provided is true and correct to the best of my knowledge. I understand that the law provides administrative and criminal penalties for withholding material information or making false statements to obtain Disaster Unemployment Assistance benefits.

Claimant's signature: _____ Date: _____

ENGLISH: Important! This document has important information about your unemployment compensation rights, responsibilities, and/or benefits. It is essential that you understand the information in this document. **If you need help (free of charge) in understanding this document in your language,** please call (833) 901-2272 or (808) 762-5751 and (833) 901-2275 or (808) 762-5752; or go to [\[https://labor.hawaii.gov/ui\]](https://labor.hawaii.gov/ui). You can also contact the local offices listed below for assistance.

CHINESE (Simplified): 重要! 本文件包含有关您的失业补偿权利、责任和/或福利的重要信息。理解本文档中的信息非常关键。如果您需要帮助（免费）以您的语言理解本文档，请致电 (833) 901-2272 或 (808) 762-5751 和 (833) 901-2275 或 (808) 762-5752；或前往 [\[https://labor.hawaii.gov/ui/lep-chi\]](https://labor.hawaii.gov/ui/lep-chi)。您也可以联系下列当地办事处寻求帮助。

JAPANESE: 重要! この文書には、失業補償の権利、責任、および/または給付に関する重要な情報が含まれています。この文書の情報をしっかり理解することが大事です。この文書を理解する上で、あなたの言語で無料サービスを必要とされる場合は、(833) 901-2272 または (808) 762-5751 および (833) 901-2275 または (808) 762-5752 までお電話ください。または [\[https://labor.hawaii.gov/ui/lep-jpn\]](https://labor.hawaii.gov/ui/lep-jpn) にアクセスして下さい。下記の地域事務所も支援を受け付けておりますので、お問い合わせください

TAGALOG: Mahalaga! May mahalagang impormasyon ang (mga) dokumentong ito tungkol sa iyong mga karapatan sa kompensasyon sa kawalan ng trabaho, mga responsibilidad, at/o mga benepisyo. Mahalagang maintindihan mo ang impormasyon sa dokumentong ito. **Kung kailangan mo ng (libreng) tulong para maintindihan ang dokumentong ito sa iyong wika,** tumawag sa (833) 901-2272 o (808) 762-5751 at (833) 901-2275 o (808) 762-5752; o pumunta sa [\[https://labor.hawaii.gov/ui/lep-tag\]](https://labor.hawaii.gov/ui/lep-tag). Maaari ka ring makipag-ugnayan sa mga lokal na tanggapan na nakalista sa ibaba para sa tulong.

ILOCANO: Nasken! Addaan nasken a damag daytoy nga dokumento maipanggep dagiti rebbeng a bayad para iti pannakaawan iti trabaho, responsibilidad, ken/wenno pagimbagan. Nasken a maawatam iti damag ditoy a dokumento. **No masapolmo iti (libre a) tulong tapno maawatam daytoy a dokumento iti lengguahem,** awagam iti (808) 762-5751 wenno (833) 901-2272 ken (833) 901-2275 wenno (808) 762-5752; wenno mapan iti [\[https://labor.hawaii.gov/ui/lep-ilo\]](https://labor.hawaii.gov/ui/lep-ilo). Mabalainmo pay a sarungkaran dagiti lokal nga opisina a nailista iti baba para iti tulong.

KOREAN: 중요! 본 문서(들)는 실업 보상 권리, 책임 및/또는 혜택에 관한 중요한 정보를 포함하고 있습니다. 이 문서에 포함된 정보를 이해하는 것이 중요합니다. 문서를 모국어로 이해할 수 있도록 도움(무료)이 필요하시다면, (833) 901-2272 또는 (808) 762-5751, (833) 901-2275 또는 (808) 762-5752 로 연락해주시십시오; 또는 [\[https://labor.hawaii.gov/ui/lep-kor\]](https://labor.hawaii.gov/ui/lep-kor) 으روی동합니다. 또한 아래의 현지 사무소에 연락해 도움을 받을 수 있습니다.

VIETNAMESE: Quan trọng! (Các) tài liệu này chứa thông tin quan trọng về quyền được bồi thường thất nghiệp, trách nhiệm và / hoặc quyền lợi của bạn. Điều quan trọng là bạn phải hiểu thông tin trong tài liệu này. **Nếu bạn cần trợ giúp (miễn phí) để hiểu tài liệu này bằng ngôn ngữ của bạn,** vui lòng gọi (833) 901-2272 hoặc (808) 762-5751 và (833) 901-2275 hoặc (808) 762-5752; hoặc truy cập [\[https://labor.hawaii.gov/ui/lep-vie\]](https://labor.hawaii.gov/ui/lep-vie). Quý vị cũng có thể liên lạc với các văn phòng địa phương được liệt kê dưới đây để được trợ giúp.

SPANISH: ¡Importante! Este(s) documento(s) contiene(n) información importante sobre sus derechos, responsabilidades y/o beneficios de compensación por desempleo. Es fundamental que comprenda la información de este documento. **Si necesita ayuda (sin cargo) para comprender este documento en su idioma,** llame al (833) 901-2272 o (808) 762-5751 y (833) 901-2275 o (808) 762-5752; o vaya a [<https://labor.hawaii.gov/ui/lep-spa>]. También puede ponerse en contacto con las oficinas locales que se indican a continuación para obtener ayuda.

CHUUKESE: Aueha! Ei taropwe a kan wor poraus aueha non usun eomuwe pung ren momon ese wor angang kena, met kopwe fofori, me/ika aninis kena. Mi fakkun namoteoch pwe en kopwe weweiti ewe poraus non ei taropwe. **Ika pwe en ka kan mochen aninis (ese wor momon) non weweitin ei taropwe non fosun fonuwom,** kose mochen korikich non (833) 901-2272 ika (808) 762-5751 me pwan (833) 901-2275 ika (808) 762-5752; ika kopwe ne no ngeni [<https://labor.hawaii.gov/ui/lep-chk>]. En kopwe kan pwan tongeni kori ewe ofes non nenieom mi maaketiw me fan ren aninis.

MARSHALLESE: Aurok! Ewōr melele aurok ilo peba in/kein kin maron, eddo, im/ak jibañ ko am ikijen kolla eo an bōjrak jermal. Aurok am melele naan ko kobban peba in. **Ñe kwōj aikuj jibañ (ejellok wonnen) ñan am melele naan ko kobban peba kein ilo kajin eo am,** joutj im kall ae tōk kim ilo (833) 901-2272 ak (808) 762-5751 im (833) 901-2275 ak (808) 762-5752; ak loḷok [<https://labor.hawaii.gov/ui/lep-mah>]. Kwōmaron bar kebaak opij ko ilo jukjukinbed eo im emōj laajrak ijin lal ñan aer jibañ kwe.

UNEMPLOYMENT INSURANCE CLAIMS OFFICES

Oahu Claims Office

830 Punchbowl Street, Room 110, Honolulu, HI 96813-5080
Phone: (808) 586-8970

Hilo Claims Office

1990 Kinoole Street, Room 101, Hilo, HI 96720-5293
Phone: (808) 974-4086

Kona Claims Office

Ashikawa Building, 81-990 Halekii Street, Room 2090
P.O. Box 167, Kealekekua, HI 96750-0167
Phone: (808) 322-4822

Maui Claims Office

54 South High Street, Room 201, Wailuku, HI 96793-2198
Phone: (808) 984-8400

Kauai Claims Office

4370 Kukui Grove Street, Suite 3-214, Lihue, HI 96766-2001
Phone: (808) 274-3043

Liable Interstate Unit

830 Punchbowl Street, Room 110, Honolulu, HI 96813-5080
Phone: (808) 586-8970