



Above enter 12-digit parcel ID  
Please include: -HEX at end of numbers  
For example: 210630150000-HEX

**CLAIM FOR HOME EXEMPTION**

Sections 8-10.4 and 8-10.5, ROH

*Please read instructions on the back before completing this form*

PRINT OWNER/OCCUPANT'S NAME	SOCIAL SECURITY NUMBER	DATE OF BIRTH
SIGNATURE (See certification below)	HOME PHONE NUMBER	BUSINESS PHONE NUMBER

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PROPERTY (PARCEL) ADDRESS	APT	CITY	STATE	ZIP
MAILING ADDRESS IF DIFFERENT FROM PROPERTY ADDRESS	APT	CITY	STATE	Zip

How many living units are located on this parcel? \_\_\_\_\_ living units  
**(For purposes of this exemption claim, your co-op unit or condominium unit counts as one living unit)**  
 How many owners reside on this parcel? \_\_\_\_\_ owners  
 How many owners living in this unit? \_\_\_\_\_ owners  
 Is any portion of this parcel or living unit being used as a rental or for business purposes?  No  Yes  
 If "Yes," indicate the building area (square feet) used for rental or business purposes: \_\_\_\_\_ square feet  
 I am a legal resident of: \_\_\_\_\_ Country \_\_\_\_\_ State \_\_\_\_\_ County  
 Do you have a home exemption anywhere else?  No  Yes  
 If "Yes," list the Tax Map Key and/or address of the parcel: \_\_\_\_\_

For proof of filing the home exemption, do one of the following:

1. Deliver to RPAD, 842 Bethel Street, Basement Honolulu, HI 96813; or RPAD, 1000 Uluohia St #206 Kapolei HI, 96707 or any Satellite City Hall requesting a receipted copy.
2. Mail to RPAD, 842 Bethel Street, Basement Honolulu, HI 96813; or RPAD, 1000 Uluohia St #206 Kapolei HI, 96707 and include a self-addressed stamped envelope to receive a receipted copy.
3. Mail via Certified or Registered Mail to RPAD, 842 Bethel Street, Basement Honolulu, HI 96813; or RPAD, 1000 Uluohia St #206 Kapolei HI, 96707

**CERTIFICATION**

I (we) certify that I own and occupy this home in accordance with Section 8-10.4, ROH, and that the foregoing is true and correct to the best of my knowledge. I understand that any misstatement of facts will be grounds for disqualification. I also understand if I cease to qualify for such exemption, I must report to the assessor within 30 days this change in facts or status. Failure to report a change in facts or status will result in disqualification and penalties.

**FOR OFFICIAL USE ONLY**

Received By: \_\_\_\_\_ Tenancy #: \_\_\_\_\_ Building Exemption %: \_\_\_\_\_  
 Date Received (post office cancellation mark): \_\_\_\_\_ Building #: \_\_\_\_\_ Land Exemption %: \_\_\_\_\_  
 For Tax Year: \_\_\_\_\_ Building #: \_\_\_\_\_

## **HOME EXEMPTION REQUIREMENTS**

The real property is owned and occupied as the *owner's principal home* as of the assessment date by an individual or individuals. *Owner's principal home* means occupancy of a home in the city with the intent to reside in the city. Intent to reside in the city may be evidenced by, but not limited to, the following factors: occupancy of a home in the city for more than 270 calendar days of a calendar year; registering to vote in the city; being stationed in the city under military orders of the United States; and filing an income tax return as a resident of the State of Hawaii, with a reported address in the city.

Your ownership must be recorded at the Bureau of Conveyances on or before *September 30<sup>th</sup>* preceding the tax year for which such exemption is claimed.

You file the claim for homeowner exemption with the Real Property Assessment Division (RPAD), Department of Budget and Fiscal Services, City and County of Honolulu, on or before *September 30<sup>th</sup>* preceding the tax year for which such exemption is claimed. Once exemption claim is accepted and approved for applied principal home, no additional home exemption filing is required.

If you are a lessee with a lease that has a term of five or more years and the parcel is used for residential purposes, the lease and any extension, renewal, assignment or agreement to assign the lease has been recorded at the Bureau of Conveyance, and the lessee agrees to pay all real property taxes during the term of the lease, you may qualify for the home exemption.

## **SOCIAL SECURITY NUMBER**

The social security number is requested for the purpose of verifying the identity of the claimant. The request is authorized under the Federal Social Security Act (42 U.S.C.A. Sec. 405(c)(2)(C)). Disclosure is voluntary and will not affect the allowance of a claim for exemption, but failure to disclose may result in delays in determining eligibility. If disclosed for purposes of this exemption, social security numbers will not be subject to public access.

## **INSTRUCTIONS**

1. **Proof of age required for home exemption:** If applying in person, present proof of age for all applicants, such as driver's license, state identification, birth certificate, or other government or legal document. If applying by mail, complete the claim form and submit a photocopy for proof of age of all applicants, such as driver's license, state identification, birth certificate, or other government or legal document.
2. If there is more than one living unit or building on this parcel, draw a plot plan below showing the location of the living unit where the owner or owners reside and the other living units or buildings on the parcel.
3. Claim forms are also accepted at all Satellite City Halls. Claims submitted at Satellite City Halls need to be in duplicate.
4. Deliver or mail via (certified or registered) the claim form with supporting documentation to:

Real Property Assessment Division  
842 Bethel Street, Basement  
Honolulu, HI 96813  
Telephone: (808) 768-3799

Real Property Assessment Division  
1000 Uluohia Street #206  
Kapolei, HI 96707  
Telephone: (808) 768-3799

**(NOTE: This claim cannot be filed by facsimile transmission. For a receipted copy, submit with a self addressed stamped envelope.)**

Additional claim forms are available at the Real Property Assessment Division, Satellite City Halls, and the City and County of Honolulu's website at [www.realpropertyhonolulu.com](http://www.realpropertyhonolulu.com)

PLOT PLAN