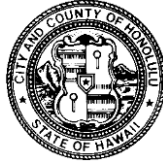


Parcel ID (Tax Map Key)



REAL PROPERTY ASSESSMENT DIVISION  
DEPARTMENT OF BUDGET  
AND FISCAL SERVICES  
CITY AND COUNTY OF HONOLULU  
Phone: (808) 768-3799  
[www.realpropertyhonolulu.com](http://www.realpropertyhonolulu.com)

Enter 12-digit Parcel ID

### Qualifying Agricultural Improvements on Vacant Agricultural Land CLAIM FOR EXEMPTION ROH § 8-10.28

PRINT CLAIMANT'S NAME AND BUSINESS NAME OR DBA (IF DIFFERENT)  OWNER OR REPRESENTATIVE  LESSEE

SITE ADDRESS

MAILING ADDRESS (IF DIFFERENT FROM SITE ADDRESS)

Are the qualifying agricultural land improvements equal or greater than \$10,000?  No  Yes  
If "Yes," please complete below.

Permit Number: \_\_\_\_\_ Permit Amount \$ \_\_\_\_\_

Describe the type of land improvements made: \_\_\_\_\_

Completion Date Per DPP: \_\_\_\_\_ Name of Inspector: \_\_\_\_\_

Permit Number: \_\_\_\_\_ Permit Amount \$ \_\_\_\_\_

Describe the type of land improvements made: \_\_\_\_\_

Completion Date Per DPP: \_\_\_\_\_ Name of Inspector: \_\_\_\_\_

Permit Number: \_\_\_\_\_ Permit Amount \$ \_\_\_\_\_

Describe the type of land improvements made: \_\_\_\_\_

Completion Date Per DPP: \_\_\_\_\_ Name of Inspector: \_\_\_\_\_

(If more space is needed, please attach additional pages)

#### CERTIFICATION

I certify that I am the owner of the land in fee simple or an authorized representative, lessee, permittee, or licensee of the owner in fee simple. I also certify that I have submitted this parcel to an approved vacant agricultural dedication pursuant to ROH § 8-7.3(d). I understand that false or fraudulent information will be grounds for disqualification of this claim.

Signature of Claimant \_\_\_\_\_ Print Claimant's Name \_\_\_\_\_ Date \_\_\_\_\_

Complete the claim form and deliver or mail (post office cancellation mark) the claim form with supporting documentation, on or before **September 30<sup>th</sup>** preceding the tax year for which you are claiming the exemption:

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) 768-3169

This claim cannot be filed by facsimile transmission via email. For a receipted copy, submit with a self-addressed stamped envelope.

#### FOR OFFICIAL USE ONLY

Received By: \_\_\_\_\_ Date Received \_\_\_\_\_ Vacant Agricultural \_\_\_\_\_  
(post office cancellation mark): \_\_\_\_\_ Petition Number \_\_\_\_\_

Land Exemption: \_\_\_\_\_ For Tax Year: \_\_\_\_\_ Approved  Disapproved

**Qualifications:**

1. The property must have been approved for a Vacant Agricultural Land Dedication.
2. The construction work permitted and listed on the claim form must be complete.
3. The cost of such improvements is equal to or greater than \$10,000.

**Vacant Agricultural Land Improvement Exemption**

The claim for exemption, once allowed, shall continue for a period of seven years. The exemption is for any incremental increase in the valuation of the property attributable to qualifying agricultural land improvements.

“Incremental increase in the valuation of real property attributable to qualifying agricultural land improvements” means the sum of all documented expenses incurred to construct the qualifying agricultural land improvements.

“Qualifying agricultural land improvements,” means construction, reconstruction or improvement of irrigation systems, drainage systems or roads, soil conservation, fire protection or animal control measures.

**Instructions:**

1. The owner in fee simple or the authorized representative of the owner in fee simple must complete this claim form. If an authorized representative is filing this form, a written authorization from the fee simple owner must be submitted with this claim form at the time of filing. If additional space is needed please attach additional pages.
2. File this claim on or before September 30<sup>th</sup> preceding the tax year for which the exemption is claimed.
3. Any subsequent improvements must be claimed separately.