

Parcel ID (Tax Map Key)



REAL PROPERTY ASSESSMENT DIVISION
DEPARTMENT OF BUDGET
AND FISCAL SERVICES
CITY AND COUNTY OF HONOLULU

Above enter 12-digit Parcel ID
For example: 210630150000

ANNUAL CLAIM FOR EXEMPTION
Public Property - Setback Lines
Sec. 8-10.17(d), Revised Ordinances of Honolulu

Name of Property Owner Telephone
Property Address Name of Business/Organization
Mailing Address Email Address

Total land area of parcel: sq.ft acre Fee Simple Leasehold
Land area for exemption claim: sq.ft acre

Type of setback(s) for exemption claim:

- Yes, I have attached documentation indicating the agency imposing setback, setback size/dimension, reason for setback, terms of setback, and other information to support exemption claim.
No, I have not attached documentation supporting my exemption claim.

If land is leased, attach a copy of the recorded lease document. Lease Rent: Monthly Annually

Term of Lease: (# of years) Other lease information:

Revised Ordinances of Honolulu: Sec. 8-10.17 Exemption--Public property.

The following real property shall be exempt from taxation:

- (d) Any portion of real property within the area upon which construction of buildings is restricted or prohibited and which is actually rendered useless and of no value to the owners thereof by virtue of any ordinance establishing setback lines thereon; provided, that in order to secure the exemption the person claiming it shall annually file between September 15th and September 30th preceding the applicable tax year a sworn written statement with the director describing the real property in detail and setting forth the facts upon which exemption is claimed, together with a written agreement that in consideration of the exemption from taxes the owner will not make use of the land in any way whatsoever during the ensuing year. Any person who has secured such exemption who violates the terms of the agreement shall be fined twice the amount of the tax which would be assessed upon the land but for such exemption.

CERTIFICATION

I declare, under penalty of law, that all statements in this return are true and correct to the best of my knowledge. As the owner of this property, I will not make use of the land in any way whatsoever during the ensuing year. I understand that any misstatement of facts will be grounds for disqualification and I shall be fined twice the amount of the tax which would be assessed upon the land.

Property Owner's Signature

Date

Complete the claim form and deliver or mail (post office cancellation mark) form, between September 15th and September 30th, preceding the tax year for which you are claiming the exemption to either office

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. For a receipted copy, submit with a self-addressed stamped envelope.

FOR OFFICIAL USE ONLY

Received By: Date Received: (post office cancellation mark)

For Tax Year: Submitted setback documentation: Yes No