

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

Enter 12-digit Parcel ID

CHANGE IN STATUS NOTICE OF HOME REOCCUPATION ROH §§ 8-10.3 and 8-10.4

1. Type of Application (Check the appropriate box that describes your purpose in filing this application)							
	REOCCUPATION AFTER:	□ Home Re (ROH § 8-10.3			tical or Temporary Wc -10.3(a)(2)(H))	rk Assignment	Fire Damage (ROH § 8-10.3(a)(2)(I))
	Instructions: If you checked <i>Home Renovation</i> , complete Nos. 2-13, and 18 below. If you checked <i>Sabbatical or Temporary Work Assignment</i> , complete Nos. 2-10, 14-15, and 18 below. If you checked <i>Fire Damage</i> , complete Nos. 2-10, and 16-18 below.						
2.	Home Exemption Claimant's Name (Last, First, Midd		, Middle Initial)) 3. Last 4 digits of Social Security No.		D. 4. Date of Birth	5. Filing Date of this Notio
6.	Site Address of Property	ite Address of Property Street Address		City		State	Postal/Zip Code
7.	Contact Information	tact Information Primary Phone See			y Phone E-mail Address		
	UPON REOCCUPATION: □ Home was occupied but was not rented, leased or sold. □ Other. Explain: ROH § 8-10.3(a)(2)(G)(iv): The home must not be rented, leased or sold during the renovation period. ROH § 8-10.3(a)(2)(H)(iii) and 8-10.3(a)(2)(I)(iv): The home the taxpayer moves from is not rented, leased or sold during the time the taxpayer resides in the designated temporary residence.						
9. Federal Income Tax Documents					10. This Notice is Filed By (Check one)		
	Claimant must provide Federal tax return(s) for the period of time the Claimant was relocated, <u>including the Schedule E (Supplemental Income and Loss)</u> , if any. In accordance with ROH § 8-10.3(a), the director may demand indicia from a property owner applying for an exemption or from an owner as evidence of continued qualification for an exemption.				 Claimant of home exemption Authorized Representative/Person with Power of Attorney for Claimant. Authorization document must be submitted with this Notice. 		
	The Federal income tax document(s) of Claimant that cover the time period the Claimant was relocated are: Attached D Not Attached				Authorization Document: Attached Not Attached		
11. Confirmation of the Home Renovation Completion Date (if applicable) Claimant must provide confirmation of the home renovation completion date. Pursuant to ROH § 8-10.3(a)(2)(G)(iii), the taxpayer must submit to the director a dated certificate of occupancy, notice of completion or close permit indicating the date the renovations have been completed. Dated certificate of occupancy, notice of completion or close permit is: Attached Not Attached 							
12. Building Permit Number				13. Renovation Permit Completion Date			
14. Start Date of Sabbatical/Temporary Work Assignment				15. Completion Date of Sabbatical/Temporary Work Assignment			
16. Date Fire Occurred		17. Date Home Reconstructed		18. Actual Date Hom	ne Will Be Reoccupied		

(continued on the back of the form)

CERTIFICATION

(Please read carefully before signing)

I certify that I am the above-named Claimant or Authorized Representative submitting this Notice in accordance with ROH §§ 8-10.3 and 8-10.4, and that the foregoing is true and correct to the best of my knowledge, and that any misstatement of facts will be grounds for disqualification. I understand the failure to file this Notice may be grounds for disallowance of the exemption. I also understand if I cease to qualify for such exemption, I must report this change in facts or status to the assessor within 30 days.

ROH § 8-10.3(a)(2): Failure to comply with any of the requirements stipulated within paragraphs (G), (H), and (I) will result in the disallowance of the home exemption and will subject the taxpayer to rollback taxes, interest and penalties as set forth in subsections 8-10.1(d) and (e) for the period of time the home exemption is continued.

Check the appropriate box:

HOME RENOVATION – I intend to reoccupy the home before the expiration of two (2) years after the renovation star date. I have submitted a dated Certificate of Occupancy, Notice of Completion, or Close Permit upon completion of work. Actual date the home will be reoccupied: ______ (please fill in)

□ SABBATICAL OR TEMPORARY WORK ASSIGNMENT - I intend to reoccupy the home within 24 months after the sabbatical or temporary work assignment begins. Actual date the home will be reoccupied: ______

(please fill in)

□ **FIRE DAMAGE** - I intend to reoccupy the home within 24 months after the date of the fire. Actual date home will be reoccupied: ______ (please fill in)

Signature of Claimant

Print Name

Date

www.realpropertyhonolulu.com

(Each Home Exemption Claimant should file a separate form) This application cannot be filed by fax or email. For a receipted copy, submit with a self-addressed stamped envelope.

HAND-DELIVER or MAIL (post office cancellation mark) this completed application with all supporting documents on:

REAL PROPERTY ASSESSMENT DIVISIONorREAL PROPERTY ASSESSMENT DIVISION842 Bethel Street, Basement1000 Uluohia Street, #206Honolulu, HI 96813Kapolei, HI 96707

Phone: (808) 768-3799

 FOR OFFICIAL USE ONLY

 Tax Year:
 Received by:
 Tenancy #:
 Building Exemption %:

 Building #:
 Land Exemption %:
 Exemption %:
 Exemption %:

 Date Received (post office cancellation mark):
 Exemption %:
 Exemption %:
 Exemption %:

 Federal Income Tax Docs:
 Attached
 Not Attached
 Exemption %:
 Exemption %:

 Federal Income Tax Docs:
 Attached
 Not Attached
 Exemption %:
 Exemption %:

 Authorization Documents:
 Attached
 Not Attached
 Exemption %:
 Exemption %: