



Parcel ID (Tax Map Key)

ZONE	SECTION	PLAT	PARCEL	CPR

2025 HOME PRESERVATION TAX LIMITATION
ANNUAL DEADLINE FILING SEPTEMBER 30TH

Part 1: Home Exemption Qualification

YES	NO
------------	-----------

- A. Has a Home Exemption been in existence on or before 2014 (10 year minimum) on this property, without change in ownership, other than transfers between family members?
And does subject property have a current or qualify for owner-occupied tax rate?
- B. Dwelling(s) on the property, is/are occupied by an owner-occupant?
- C. Does real property have a net taxable assessed value exceeding \$1,000,000?
- D. Is the gross income of all owners \$200,000 or less?
- E. Are the real property taxes current on the Homeowner's property?
- F. The property at this application, is the only property owned by the Applicant/Title Owner.

If items A through F of the above are marked "Yes", please proceed.
 If any of the above are marked "No", **DO NOT PROCEED, you are NOT eligible for a credit.**

Part II: Title Owners Total Gross Income for 2023 Tax Year

H. Enter the total **GROSS INCOME** of all title owners

Filed 2023 Federal Income Tax Return Form 1040/1040-SR \$ _____
 with Schedules 1 - 3, Schedules C, D, E, F, as applicable and

Filed 2023 State of Hawai'i Tax return (N-11) pages 1-4 \$ _____

Or complete an Affidavit, **for any title owners who do not** file Federal and/or State Income Tax or both.

Part III: Calculation Indicate 'Y' (yes) or 'N' (no) if Married and Filing Separately 'Y' 'N'

- I. Enter 3% of TOTAL GROSS INCOME (Multiply Line H Part II by .03) \$ _____
 Your real property taxes are the higher of the amount appearing on Line I or \$500.00)

Part IV: Applicant Information

- 1) Applicant's Name: _____
- 2) Social Security Number: _____ Date of Birth: _____
- 3) Property (Parcel) Address: _____
- 4) Mailing Address: _____
- 5) Home number: _____ Cell number: _____
- 6) Contact email address: _____

Part V: Certification (One application to be completed and signed by each title owner)

I hereby certify that I am a qualified homeowner, that the information above is true and correct, and that the tax return submitted with this application is a true and correct copy. I authorize the County of Kaua'i to verify my income or other information on this application with the State Tax Office or Internal Revenue Service. **Any person who falsifies and misrepresents any information in meeting requirement of Chapter 5A- 11.A2(c) shall be fined \$1,000 or imprisoned for not more than one year or both.**

 Signature Date

FOR OFFICIAL USE ONLY

Received by: _____ Date: _____