



COUNTY OF KAUA'I
FINANCE DEPARTMENT
REAL PROPERTY ASSESSMENT DIVISION
CLAIM FOR EXEMPTION KULEANA LANDS COK Section 5A-11.29

Parcel ID (Tax Map Key) (4) _____ - _____ - _____ - _____ - _____
Zone Section Plat Parcel CPR

LAST NAME	FIRST NAME	MIDDLE INITIAL
DATE OF BIRTH	CELL PHONE	HOME/BUSINESS PHONE
SITE ADDRESS		
MAILING ADDRESS (IF DIFFERENT FROM SITE ADDRESS)		

- A. The current Land Use Ordinance zoning of parcel is:
 Residential Agriculture Other: _____
- B. Attached is proof of identification, such as a photocopy of an original government-issued identification containing a photo and date of birth, such as your drivers' license, a Hawai'i State identification card, passport.
 Yes No
- C. Attached is proof of genealogy verification (the owner is a lineal descendant of the person(s) that received the original title to the Kuleana land) issued by the Office of Hawaiian Affairs, or by court order.
 Yes No

**Contact the Office of Hawaiian Affairs (OHA) for information about the genealogy verification process.
Contact the Kuleana Call Center at (808) 594-1967**

Signature of Claimant

Date

I certify that I own this parcel in accordance with Section 5A-11.29 COK and that the foregoing is true and correct to the best of my knowledge. I understand that any misstatement or misrepresentation 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.

The deadline to file this one-time initial claim is on or before **September 30th** preceding the tax year for which such exemption is to become effective. Please submit the complete claim to the address on the top of this form.

(NOTE: For a receipted copy, submit with self-addressed, stamped envelope.)

FOR OFFICIAL USE ONLY

Received By: _____	Date Received: _____
Tax Clerk/Assessor	(U. S. Postmark) Number For Tax Year
Approved _____ Disapproved _____	Proof of identification: _____ Attached _____ Not Attached
	Proof of OHA verification of genealogy: _____ Attached _____ Not Attached
	Proof of court-order verification of genealogy: _____ Attached _____ Not Attached



Contact the Office of Hawaiian Affairs (OHA) for information about the genealogy verification process.

Call the “Kuleana Call Center” at (808) 594-1967

**OHA's address is: Office of Hawaiian Affairs
711 Kapi'olani Blvd, 5th Floor
Honolulu, Hawai'i 96813**

ORDINANCE NO. 873 – BILL NO 2281, Draft 1

Section SA-II.29 Kuleana Land

- (a) Real property zoned as residential or agricultural, any portion of which is designated kuleana land, shall pay the minimum real property tax as long as the real property is owned in whole or in part by a lineal descendant of the person(s) that received the original title to the kuleana land, and provided that the kuleana land shall be for primary ka hale use (owner- or family-occupied), agricultural use, or vacant. Residential use shall not include vacation rental use.
- (b) An application for this exemption shall be filed with the Director of Finance on forms prescribed by the Director. The application shall include documents verifying that the condition set forth in subsection (1) has been satisfied. The Director of Finance shall prescribe what shall be sufficient to show genealogy verification, provided that;
 - (1) genealogy verification by the Office of Hawaiian Affairs or by court order shall be deemed sufficient; and,
 - (2) the applicant/landowner shall be responsible for the cost of such evidence. The Director of Finance shall require the applicant to obtain a court order verifying ownership of property if the applicant is not identified as the owner of the property in the records of the Director.
- (c) For purposes of this section, "kuleana land" means those lands granted to native tenants pursuant to L. 1850, p. 202 entitled "An Act Confirming Certain Resolutions of the King and Privy Council, Passed on the 21st Day of December, A.D. 1849, Granting to the Common People Allodial Titles for Their Own Lands and House Lots, and Certain Other Privileges, " as Amended by L. 1851, p. 98, entitled "Act to Amend An Act Granting to the Common People Allodial Titles for Their Own Lands and House Lots, and Certain Other Privileges" and as Further amended by any subsequent legislation."



STATE OF HAWAI`I
OFFICE OF HAWAIIAN AFFAIRS
711 KAPI`OLANI BOULEVARD, SUITE 500
HONOLULU, HAWAI`I 96813
PHONE (808) 594-1888 FAX (808) 594-1865

CERTIFICATION AND RELEASE FORM

I, _____, have requested the assistance of the Office of Hawaiian Affairs (OHA) in my effort to verify that I am a lineal descendant of the person(s) who received the original title to a kuleana-land parcel(s) for which I hope to receive a kuleana-land property-tax exemption from the County of Kaua'i. I understand that I, not OHA, bear the burden of obtaining the evidence to support my claimed exemption. I also understand that any findings and conclusions that OHA may make will be based on the information that I provide.

I certify that my information that I provide to OHA will be accurate and reliable to the best of my knowledge.

I hereby release and discharge OHA from any and all liability, claims and demands arising out of or in connection with OHA's assistance and in connection with any findings and conclusions that OHA may reach and communicate to third parties as to whether I am a lineal descendant.

I am of full age and have the right to contract in my own name. This release shall be binding upon me and my heirs and my legal representatives.

I have read the above and fully understand the contents.

Printed Name

Signature

Date

Signature of Witness