



COUNTY OF KAUA'I
FINANCE DEPARTMENT
REAL PROPERTY ASSESSMENT DIVISION

AFFIDAVIT OF REAL PROPERTY OWNER

I, _____,
whose current address is _____,

hereby swear the following information is true and correct:

1. I was **NOT REQUIRED** to file an income tax return in ANY STATE
2. I was **NOT REQUIRED** to file a Federal income tax return

My income for the calendar year, prior to the date of this affidavit, is hereby submitted with copies of Social Security Benefits Statement(s) (SSA-1099), year-end pension benefit statement(s), distributions from IRA, Keogh accounts, etc. To confirm my total gross income was \$ _____.

I understand and accept that the Director of Finance County of Kaua`i, or his duly designated representative of the Department of Finance, County of Kaua`i, may require that I request to verify my income tax filing status with the Department of Taxation, State of Hawai`i, and the Internal Revenue Service of the United States; and

I waive my privacy rights that I may have pursuant to Chapter 92F, Hawai`i Revised Statutes, or any other federal, state or county laws, to the extent that the Department of Finance, County of Kaua`i, may obtain records and documents from the appropriate agencies named above, and, in so doing, I waive, release and forever discharge the County of Kaua`i, its officers, employees and agents, from all liability for damage of any kind resulting from their actions in verifying my income tax filing status.

I hereby understand and acknowledge that any person who falsifies and misrepresents any information in meeting the requirements of Chapter 5A-11.4 shall be fined \$1,000 or imprisoned for not more than one year or both.

IN WITNESS WHEREOF, I HAVE READ THIS AFFIDAVIT AND UNDERSTAND THE CONTENTS

SIGNATURE OF OWNER (1 FOR EACH OWNER-OCCUPANT)