



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
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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 INCOME 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: _____