

COMPLETE ONE CLAIM FOR EACH PARCEL OWNED
 RP Form 19-68(d) (Rev 05/2004)
 DEPT. OF FINANCE

TAX MAP KEY/PARCEL ID					
ISLE	Z	S	PLAT	PARCEL	CPR
3					

**COUNTY OF HAWAI'I
 REAL PROPERTY TAX DIVISION**

101 Pauahi St., Ste. No. 4, Hilo, Hawai'i 96720
 Phone: (808) 961-8201
 75-5706 Kuakini Hw., Ste. No. 112, Kailua-Kona, Hawai'i 96740
 Phone: (808) 327-3540

NOTICE OF CHANGE IN FACTS REPORTED ON HOME EXEMPTION CLAIM

Notice is hereby given that the above parcel has been

- 1. Sold as of _____
- 2. Leased as of _____
- 3. Rented as of _____
- 4. Other – specify: _____
 Effective Date: _____

I understand that the filing of this notice cancels the claim for exemption previously filed by me. Owners must file new exemption claim for new residence.

 (Print Claimant's Name) Telephone Number _____

Mailing Address _____

 Claimant's Signature Date _____

(For Tax Office Use Only)

Effective _____ Tax Year

Date Received (U.S. Postmark): _____

By: _____

Input Date: _____ By: _____