

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

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

Is this your primary residence? [] Yes [] No

CLAIM FOR DISABILITY EXEMPTION*

Please read the instructions on the back before completing this form

Exemption is hereby claimed from Real Property Tax due to:

(Please check one)

- Hansen's disease sufferer
- Blind
- Deaf
- Totally disabled

(Print Claimant's Name)

(Date of Birth)

Mailing Address _____

Business Phone

Residence Phone

Date _____ 20____

Claimant's Signature

*This exemption is in addition to the regular home exemption. To obtain the regular home exemption, you must file a claim on RP FORM 19-71. Impairment or disability must be certified by a licensed physician, ophthalmologist, otolaryngologist, licensed audiologist or optometrist and said certificate must be filed at the Real Property Tax Office.

(For Tax Office Use Only)

Date Received (U.S. Postmark): _____ 20____

Effective _____ Tax Year

By: _____

Claim Disallowed for _____ Tax Year

Input Date: _____

Input Date: _____

By: _____

By: _____

Reason: _____

PITT _____ EX CD _____ CARD # _____ BUILDING % _____ LAND % _____

INSTRUCTIONS:

1. Fill in the tax map key/parcel ID of your property.
2. Complete one claim for each parcel owned.
3. Deliver or mail the claim form with supporting documentation to:

Real Property Tax Division

Aupuni Center, 101 Pauahi Street, Suite No. 4, Hilo, Hawai'i 96720

Telephone: (808) 961-8201

74-5044 Ane Keohokalole Hwy., Bldg. D, 2nd Flr., Kailua Kona, Hawai'i 96740

Telephone: (808) 323-4880

4. Claim forms are available at the Real Property Tax Division Hilo Office, Kona Office or the website at www.Hawaiipropertytax.com.