CASE NO. _____

RP Form 19-77 (Rev 02/2011)
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
74-5044 Ane Keohokalole Hwy., Bldg. D, 2nd Flr., Kailua-Kona, Hawai'i 96740
Phone: (808) 323-4880

CLAIM FOR CHARITABLE AND MISCELLANEOUS EXEMPTION

Exemption is hereby claimed from Real Property under County Ordinance Chapter 19 Section 19-77.

[ ] SCHOOL
[ ] HOSPITAL/NURSE HOME
[ ] CHURCH
[ ] CEMETERY
[ ] PUBLIC USE
[ ] NON-PROFIT
[ ] OTHER SPECIFY: _____

Name of Organization: _____

Mailing Address _____

_____
Telephone Number

1. Explain the charitable or miscellaneous use: _____
_____
2. Is all the land and/or buildings used exclusively for the purpose claimed? [ ] Yes [ ] No
3. If the answer is no, explain and state area used for business.
_____
_____
4. **Submit documentation from the Internal Revenue Service verifying exemption status.**

CERTIFICATION

I declare, under penalty of law, that all statements in this return are true and correct to the best of my knowledge. I understand that any misstatement of facts will be grounds for disqualification and penalty.

Date _____ 20_____

_____ (Print Officer's Name)
_____ Officer's Signature

(For Tax Office Use Only)

Effective _____ Tax Year

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

By: _____

Claim Disallowed for _____ Tax Year

Input Date: _____

Input Date:_____

By: _____

By: _____

Reason:_____

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

Hawai'i County is an Equal Opportunity Provider and Employer