



COUNTY OF HAWAI'I  
DEPARTMENT OF FINANCE  
REAL PROPERTY TAX DIVISION

HILO – AUPUNI CENTER  
101 PAUHI ST., STE. 4 HILO, HI 96720  
PHONE: (808) 961-8354

KONA – WEST HAWAI'I CIVIC CENTER  
74-5044 ANE KEOHOKALO LE HWY., BLDG. D, 2<sup>ND</sup> FLR. KAILUA-KONA, HI 96740  
PHONE: (808) 323-4881

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

## FARM PLAN SUMMARY

COMMUNITY FOOD SUSTAINABILITY:

### OWNERSHIP INFORMATION

| PRINT NAME | SIGNATURE | CONTACT # | MAILING/EMAIL ADDRESS |
|------------|-----------|-----------|-----------------------|
|            |           |           |                       |
|            |           |           |                       |
|            |           |           |                       |
|            |           |           |                       |

If property is leased or used by someone else, please provide contact information below.

### FARMER/RANCHER INFORMATION

RECORDED LEASE

CONTRACT/AGREEMENT\*\*\*

\*\*\*PLEASE PROVIDE COPY OF CONTRACT/AGREEMENT

| PRINT NAME | SIGNATURE | CONTACT # | MAILING/EMAIL ADDRESS |
|------------|-----------|-----------|-----------------------|
|            |           |           |                       |
|            |           |           |                       |

1. Does your property participate in a Food Hub, Co-Op or other community-based food sharing program?  Yes  No

Please provide name of organization and contact info: \_\_\_\_\_

If yes, please explain below and include information on the name(s), program, and how much product you are contributing to the program listed:

# PRODUCTION INFORMATION

2. Please describe your current production or anticipated production goals below:

| NAME OF CROP | # TREES/UNITS | # ACRES | \$ EST. VALUE |
|--------------|---------------|---------|---------------|
|              |               |         |               |
|              |               |         |               |
|              |               |         |               |
|              |               |         |               |
|              |               |         |               |
|              |               |         |               |
|              |               |         |               |
|              |               |         |               |
|              |               |         |               |
|              |               |         |               |

| LIVESTOCK-POULTRY | TOTAL # OF ANIMALS | # ACRES | \$ EST. VALUE |
|-------------------|--------------------|---------|---------------|
|                   |                    |         |               |
|                   |                    |         |               |
|                   |                    |         |               |
|                   |                    |         |               |

If you have not produced product within the last 12 months, please explain when you anticipate your first crop/livestock will be ready: \_\_\_\_\_

FALLOW/ROTATION SCHEDULE  
ALLOWED FALLOW:  
1 of 5 Years

3. If fallow time is required/needed, please provide the details below:

| ACRES | DURATION | YRS. | MOS | REASON FOR FALLOW |
|-------|----------|------|-----|-------------------|
|       |          |      |     |                   |

4. If applicable, list other TMKs that are associated with your farm operation (may be non-contiguous).

|  |  |
|--|--|
|  |  |
|  |  |
|  |  |
|  |  |

## ADDITIONAL REMARKS/COMMENTS/JUSTIFICATION

5. For pasture lands:

Is there perimeter fencing for the area your livestock grazes on this parcel?  Yes  No

Is the fencing permanent?  Yes  No

Is there a water source for the area your livestock grazes on this parcel?  Yes  No

If there is no permanent perimeter fencing, please share how your livestock are contained? Examples may include natural geographic features such as a gulch or adjacent parcel which is also pasturing livestock.

**---FOR RENEWAL ONLY---**

6. Does your farm operation (can include farm income from more than this parcel) have \$1,000 annual sales or donation to 501(c)(3)?  Yes  No

If no, please provide additional information of your farm operation including if you anticipate \$1,000 annual gross income in the future or if you are trading/bartering, sharing, donating or how your agricultural products are being utilized:

**FOR TAX OFFICE USE ONLY**

Date Received: \_\_\_\_\_

By: \_\_\_\_\_