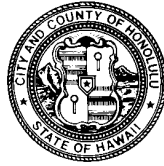


Parcel ID (Tax Map Key)



REAL PROPERTY ASSESSMENT DIVISION
DEPARTMENT OF BUDGET
AND FISCAL SERVICES
CITY AND COUNTY OF HONOLULU
Phone: (808) 768-3799
www.realpropertyhonolulu.com

Enter 12-digit Parcel ID

**Low-Income Rental Housing
ANNUAL CLAIM AND CERTIFICATION FOR CONTINUED EXEMPTION
ROH §§ 8-10.17 & 8-10.18**

Please read instructions on page 2 prior to completing this claim.

Name of Housing Project	Name of Owner/Organization	
Site Address	Mailing Address (if different from site address)	
Managing Agent's Name/Title	Managing Agent's Phone	Managing Agent's Email
Regulatory Agency's Name/Representative	Representative's Phone	Representative's Email

Complete the following based on the terms of the regulatory agreement for the housing project (see page 2 for required attachments):

Effective date: _____ Recordation date: _____ End date: _____

Length of regulated period (in years): _____

Housing project's parcel ID (TMK) is specifically identified in the Regulatory Agreement: Yes No

Total number of dwelling units in the housing project: _____

Number of dwelling units rented to households with income of 80% AMI or less: _____

Rent Roll (one-year period immediately preceding the date of this form) Attached

REGULATORY AGENCY CERTIFICATION

I declare, under penalty of law, (1) that I am an authorized representative of the regulatory agency above-identified, (2) that all statements in this certification regarding the housing project and the regulatory agreement, above-identified, are true and correct to the best of my knowledge, (3) that the housing project continues to be in compliance with the initial regulatory agreements and (4) is in compliance with the applicable low-income rental requirements in the manner provided by ROH §§ 8-10.17 & 8-10.18.

Signature of Regulatory Agency Representative Print Name of Regulatory Agency Representative Date

HOUSING PROJECT CERTIFICATION

I declare, under penalty of law, (1) that I am an authorized representative of the housing project above-identified, (2) that all statements in this certification regarding the housing project and the regulatory agreement, above-identified, are true and correct to the best of my knowledge, and (3) is in compliance with the applicable low-income rental requirements in the manner provided by applicable law or rule, including ROH §§ 8-10.17 & 8-10.18.

Signature of Owner/Managing Agent Print Name of Owner/Managing Agent Date

For Tax Year _____ **FOR OFFICIAL USE ONLY** Approved Disapproved Appraiser Initial _____

Received By: _____ Date Received (post office cancellation mark): _____

Documents Attached: Rent Roll

Partial Exemption Late Filing (Rec'd after September 30th) \$500 Late Filing Fee Rec'd Filing Rec'd After November 15th

PURPOSE

To claim a continuation of the Low-Income Rental Housing exemption approved in the preceding tax year, annually file Form BFS-RPA-E-8-10.17A *Annual Claim and Certification for Continued Exemption – Low-Income Rental Housing* by September 30 to certify compliance with (1) the requirements in ROH § 8-10.17 and § 8-10.18 and (2) the current regulatory agreement applicable to the low-income rental housing project.

INSTRUCTIONS

Complete one Form BFS-RPA-E-8.10.17A *Annual Claim and Certification for Continued Exemption – Low-Income Rental Housing* for each parcel ID (tax map key number):

- Enter parcel ID (tax map key number), project/organization name, site address, contact information for claimant organization and the managing agent, and information regarding the regulatory agency that oversees the low-income rental housing project.
- Enter the dates and term of the regulatory agreement and all applicable information pertaining to the project.
- Enter the total number of dwelling units in the project.
- Enter the number of dwelling units rented to households with income of 80% AMI or less.

Required:

Attach the rent roll for a one-year period immediately preceding the date of this form, containing the following information:

- Designated dwelling unit numbers
- Number of household members in each dwelling unit
- Annual household income for each dwelling unit

IMPORTANT INFORMATION REGARDING THE LOW-INCOME RENTAL HOUSING REAL PROPERTY TAX EXEMPTION:

This form must be signed by a representative of the governmental agency that regulates the Housing Project, then submitted to the Real Property Assessment Division no later than September 30th of each year after the initial filing to continue the claim for this exemption. *If a claim for continued exemption is submitted after the September 30th deadline but on or before the November 15th deadline, a late filing penalty of \$500.00 must be included with the late filing. **ROH § 8-10.18(c)(1).***

If the ownership of the parcel, or any portion thereof, has been transferred or there has been a change to the parcel, such as subdivision or consolidation with another parcel, your existing exemption may be cancelled and you must file a new *BFS-RPA-E-8-10.17 INITIAL CLAIM FOR EXEMPTION – Low-Income Rental Housing* form and any required documentation with the Real Property Assessment Division. Deliver or mail via USPS the completed claim form with supporting documentation to:

Real Property Assessment Division
842 Bethel Street, Basement
Honolulu, HI 96813

OR

Real Property Assessment Division
1000 Uluohia Street #206
Kapolei, HI 96707

This form cannot be filed by facsimile transmission or via email. For a receipted copy, submit with a self-addressed stamped envelope. Additional forms are available at the Real Property Assessment Division, Satellite City Halls, and the City and County of Honolulu's website at www.realpropertyhonolulu.com.

ORDINANCE

See the *ROH Chapter 8 Real Property Tax*, online at: <https://codelibrary.amlegal.com/codes/honolulu/latest/honolulu/0-0-0-5451>.