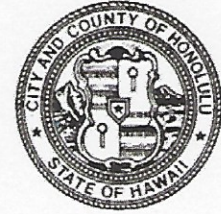




NOTICE OF REAL PROPERTY ASSESSMENT APPEAL  
BOARD OF REVIEW FOR THE  
CITY AND COUNTY OF HONOLULU



TAX YEAR: 2015 (2014)

A \$25.00 DEPOSIT MUST BE INCLUDED WITH EACH APPEAL  
PLEASE READ INSTRUCTIONS ON THE NEXT PAGE

|                           |                 |                     |
|---------------------------|-----------------|---------------------|
| PARCEL ID (TAX MAP KEY)   |                 | (Must be filled in) |
| PROPERTY CLASSIFICATION   | "RESIDENTIAL A" | (Must be filled in) |
| NAME OF OWNER OR TAXPAYER |                 | (Must be filled in) |

OWNER'S OR TAXPAYER'S OPINION OF ASSESSED VALUE IS \$ \_\_\_\_\_ (Must be filled in)  
The Owner's or Taxpayer's opinion of assessed value must be filled in, otherwise the appeal is subject to dismissal.  
(opinion of value will be rounded to nearest \$100 – consider rounding if your opinion of value is near 10% of the assessed value)

One or more of the grounds of objection listed below must be selected, otherwise the appeal is subject to dismissal. My grounds of objection to the real property assessment are (check one or more boxes below):

- (1) Assessment of the property exceeds by more than 10% the market value of the property.
- (2) Lack of uniformity or inequality, brought about by illegality of the methods used or error in the application of the methods to the property involved. "RESIDENTIAL"  
(If disputing property classification, refer to paragraph 4 of the filing instructions.)
- (3) Denial of an exemption to which the Taxpayer is entitled and for which such person has qualified.  
Exemption Type \_\_\_\_\_ Exemption Amount \$ \_\_\_\_\_
- (4) Illegality, on any ground arising under the Constitution or laws of the United States or the laws of the state or the ordinances of the city in addition to the ground of illegality of the methods used, mentioned in clause (2).

SIGNATURE \_\_\_\_\_ PRINT NAME \_\_\_\_\_  
(A signature is required to process this appeal)

I am the:  Owner  Representative\* or Contractual Taxpayer\*\*

- ❖ If you are a Representative, written authorization to represent appellant must accompany this appeal and compliance with Chapter 466K, Hawaii Revised Statutes ("HRS") is required.
- ❖ If you are a Contractual Taxpayer, proof of contractual obligation to pay property tax must accompany this appeal.

|                            |       |                            |  |
|----------------------------|-------|----------------------------|--|
| YOUR TITLE                 |       | MAILING ADDRESS FOR APPEAL |  |
| CITY                       | STATE | ZIP CODE                   |  |
| TELEPHONE NUMBER (Daytime) |       | E-MAIL ADDRESS             |  |

| FOR OFFICIAL USE ONLY  |                   |                       |                                     |
|--|-------------------|-----------------------|-------------------------------------|
| Received / U.S. Postmark _____   | Reviewed By _____ | Case No. _____        | Appraiser No. _____                 |
| Evidence: NES AR _____   |                   | CSoL SC LoRA OE _____ |                                     |
| BOR Decision: 1 2 A B C D IE F G H J K L M N P Q R S T U V W X Y Z 3 4 5 6 |                   |                       |                                     |
| Notes _____  |                   |                       |                                     |
| Valuation _____  | Exemption _____   | Continuance _____     | <input type="checkbox"/> Settlement |
| BOR Chair _____  |                   | Date _____            |                                     |