Form P-64A
(REV. 2009)

STATE OF HAWAII—DEPARTMENT OF TAXATION

CONVEYANCE TAX CERTIFICATE

(Please Type or Print)

BOC Document Number

Clear Form

PART I

1. TAX MAP KEY INFORMATION:

TAX MAP KEY				
Z	S	PLAT	PARCEL	CPR NO.
2	4	059	032	n/a

ISLAND Hawaii **APT. NO.** n/a

CLIP THIS FORM TO DOCUMENT TO BE RECORDED AND MAIL OR DELIVER TO THE BUREAU OF CONVEYANCES. ***DO NOT STAPLE.*** All parts of this Form *MUST be completed. If any area is incomplete,* **Form P-64A will not be accepted.**

Before completing this form, please read the Instructions for Form P-64A and Form P-64B. To obtain the Instructions, go to the Department of Taxation's website at **www.hawaii.gov/tax** or call the Department to request forms at 808-587-4242 or 1-800-222-3229 (toll-free).

2. NAMES OF PARTIES TO THE DOCUMENT:

SELLER(S) / TRANSFEROR(S) / GRANTOR(S), ETC.

Hawaii Housing Finance and Development Corp.

PURCHASER(S) / TRANSFEREE(S) / GRANTEE(S), ETC.

3. REAL PROPERTY TAX INFORMATION:

If the document will not be recorded, please provide: (1) land area; and (2) address or short legal description of property: _____

Please provide mailing address for assessment notice (do not enter "Same" or "No Change"):

NAME **ADDRESS** **POSTAL/ZIP CODE**

Please provide real property tax billing address, **if different** from assessment address (do not enter "Same" or "No Change"):

NAME **ADDRESS** **POSTAL/ZIP CODE**

PART II. TAX COMPUTATION AND BALANCE DUE:

1. **DATE OF TRANSACTION** *(For Transactions dated prior to July 1, 2009 see Instructions for rates.)* ..... **1.**
2. Amount from Page 2, Part IV, line 1, 2c, 3c, or 4c..... **2.**
3. Less: personal property included in amount on line 2, if applicable..... **3.**
4. Difference — **Actual and full consideration** (line 2 minus line 3)..... **4.**
5. By checking this box and signing below, the Purchaser(s)/Transferee(s)/Grantee(s), etc. attest under penalties set forth in the declaration below, that this transaction, is **EITHER**:
   - Not a sale of a condominium or single family residence **OR**
   - The purchaser is ELIGIBLE for a county real property tax homeowner's exemption with respect to the property conveyed..... **5.** ➤ ☑
6. Enter the applicable **Conveyance Tax Rate**: *(For Transactions dated prior to July 1, 2009 see Instructions for rates.)*

If the amount on Line 4 is:	And the box on Line 5 . . . . is NOT checked.	IS checked.
Less than $600,000	.0015	.0010
$600,000 or more but less than $1,000,000	.0025	.0020
$1,000,000 or more but less than $2,000,000	.0040	.0030
$2,000,000 or more but less than $4,000,000	.0060	.0050
$4,000,000 or more but less than $6,000,000	.0085	.0070
$6,000,000 or more but less than $10,000,000	.0110	.0090
$10,000,000 or more	.0125	.0100

6. x **0.0** __ __ __

7. **Conveyance Tax** (Multiply line 4 by line 6 and round to the nearest ten cents ($.10) ..... **7.**

8a. **Penalty.** For late filing *(See Instructions)*..... **8a.**

8b. **Interest.** For late payment *(See Instructions)*..... **8b.** **8.**

9. **Total Balance Due** (Add lines 7 and 8) ..... **9.**

DECLARATION

I (We) declare, under the penalties prescribed for false declaration in section 231-36, Hawaii Revised Statutes (HRS), that this certificate (including accompanying schedules or statements) has been examined by me (us) and, to the best of my (our) knowledge and belief, is a true, correct, and complete certificate, made in good faith, for the actual and full consideration paid on the conveyance to which this certificate is appended, pursuant to the Conveyance Tax Law, chapter 247, HRS. **Note:** You must have a power of attorney if signing as agent.

SIGNATURE(S) - Seller(s)/Transferor(s)/Grantor(s), Etc.
(If agent is signing, print or type name below signature)

Karen Seddon, HHFDC Executive Director

DAYTIME PHONE NO.: (808) 587 - 0641
E-MAIL ADDRESS:

SIGNATURE(S) - Purchaser(s)/Transferee(s)/Grantee(s), Etc.
(If agent is signing, print or type name below signature)

DAYTIME PHONE NO.: ( ) _____ - _____
E-MAIL ADDRESS:

PART III. Enter all amounts paid or required to be paid for the real property interest conveyed (cash and/or noncash). See Instructions.

1. Cash	**1**		
2. Relief/assumption of debt	**2**		
3. Value of tangible good(s) e.g. equipment, furniture, etc.	**3**		
4. Value of shares of stock	**4**		
5. Value of interest in limited liability company/limited liability partnership/partnership	**5**		
6. Value of any other economic benefit	**6**		
7. Total amount of actual and full consideration (add lines 1 through 6)	**7**		

PART IV. Fill in the appropriate line(s) for the transfer taking place and the amount of consideration. For more information, see Instructions.

SALE, AGREEMENT OF SALE (A/S), ASSIGNMENT OF A/S, OR OTHER TRANSFER/CONVEYANCE:					
1. Total amount of actual and full consideration paid or required to be paid (From Part III, line 7)			**1**		
EXCHANGE OF PROPERTIES:					
2a. Market value of all property(ies) exchanged	**2a**				
2b. Total amount of other actual and full consideration paid or required to be paid (From Part III, line 7)	**2b**				
2c. Total (Add lines 2a and 2b)			**2c**		
ASSIGNMENT OF LEASE:					
3a. Total amount of actual and full consideration paid or required to be paid (From Part III, line 7)	**3a**				
3b. Value of any increase in lease rental capitalized at 6% (See Instructions)	**3b**				
3c. Total (Add lines 3a and 3b)			**3c**		
LEASE OR SUBLEASE:					
4a. Rent capitalized at 6% (See Instructions) Term 65 years beginning: _____					
1st period 65 yrs @ $ 1.00/yr. **2nd period** _____ yrs @ $ _____/yr.					
3rd period _____ yrs @ $ _____/yr. **4th period** _____ yrs @ $ _____/yr.					
Total rent capitalized at 6%.	**4a**	16.28			
4b. Total amount of actual and full consideration paid or required to be paid for the leasehold, including improvements (from Part III, line 7)	**4b**				
4c. Total (Add lines 4a and 4b)			**4c**		

Mail or deliver this form with all applicable documents to the **Bureau of Conveyances** at:

Bureau of Conveyances
P.O. Box 2867
Honolulu, Hawaii, 96803-2867

OR

Bureau of Conveyances
1151 Punchbowl Street
Honolulu, Hawaii, 96813

INWOOD FACTORS AT 6%

Years	Factor	Years	Factor	Years	Factor	Years	Factor	Years	Factor	Years	Factor	Years	Factor
1	0.943	16	10.105	31	13.929	46	15.524	61	16.190	76	16.467	91	16.583
2	1.833	17	10.477	32	14.084	47	15.589	62	16.217	77	16.479	92	16.588
3	2.673	18	10.827	33	14.230	48	15.650	63	16.242	78	16.489	93	16.592
4	3.465	19	11.158	34	14.368	49	15.707	64	16.266	79	16.499	94	16.596
5	4.212	20	11.469	35	14.498	50	15.761	65	16.289	80	16.509	95	16.600
6	4.917	21	11.764	36	14.620	51	15.813	66	16.310	81	16.518	96	16.604
7	5.582	22	12.041	37	14.736	52	15.861	67	16.330	82	16.526	97	16.608
8	6.209	23	12.303	38	14.846	53	15.906	68	16.349	83	16.534	98	16.611
9	6.801	24	12.550	39	14.949	54	15.949	69	16.367	84	16.541	99	16.614
10	7.360	25	12.783	40	15.046	55	15.990	70	16.384	85	16.548	100	16.617
11	7.886	26	13.003	41	15.138	56	16.028	71	16.400	86	16.555		
12	8.383	27	13.210	42	15.224	57	16.064	72	16.415	87	16.561		
13	8.852	28	13.406	43	15.306	58	16.098	73	16.429	88	16.567		
14	9.294	29	13.590	44	15.383	59	16.131	74	16.443	89	16.573		
15	9.712	30	13.764	45	15.455	60	16.161	75	16.455	90	16.578		

For leases with terms of more than 100 years, refer to Inwood Tables or an equivalent table that computes present value of $1.00 per period at an interest rate of 6% per period.