

Office of the KITSAP COUNTY ASSESSOR

614 Division Street, MS-22 · Port Orchard, WA 98366-4687 · www.kitsap.gov/assessor · 360-337-7160

OWNERSHIP AFFIRMATION

As an owner, I hereby indicate by my signature below that I do not occupy said home and I

have not contributed any financial support, nor do I plan to in the future on the residence

Occupied by _____

Residence located at _____

Account Number ______.

I declare that the foregoing statement is true and correct.

Signature of non-occupied owner

Date

Printed Name

Physical Address

City, State, Zip

Telephone Number

THIS CLAIM IS SUBJECT TO AUDIT BY THE DEPARTMENT OF REVENUE

Any person willfully giving false information shall be subject to the perjury laws of the State of Washington. Any exemption granted through erroneous information shall be subject to the correct tax being assessed for the last three years, plus 100 percent penalty.