



Office of the

KITSAP COUNTY ASSESSOR

Phil Cook, Assessor

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

STATEMENT OF NON-OWNER OCCUPANT

Exemption Applicant _____

Residence located at _____

Account Number _____

Non-owner Occupant _____

Yes / No: I was residing at this property during the assessment year _____

Yes / No: I contributed financially to the household expenses in exchange for room & board (Rent, groceries, utilities, etc)

If yes – Monthly amount \$ _____

As an occupant of this residence, I hereby indicate by my signature below that the statements made are true and correct.

Signature of Occupant

Date

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.