

**STATE OF HAWAII
DEPARTMENT OF TAXATION**



**General Information
and Scannable Specifications
for
Form VP-1 (Rev. 2010)**

Contact Information

Hawaii Department of Taxation
Technical Section
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Honolulu, Hawaii 96813

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**Hawaii Software Vendor Website
Address:**

www.hawaii.gov/tax/vendor/vendor.htm

Note: Reproductions must meet requirements as established in our current Forms Reproduction Policy and within this document.

Form VP-1 (Rev. 2010)**General Information and Scannable Specifications**

This document provides software vendors with the requirements for reproducing Form VP-1. Form VP-1 is designed for electronic scanning that permits faster processing with fewer errors. Software developers who reproduce, develop, or distribute Form VP-1 must create the form so the variable data (specified fields containing

taxpayer information) are printed in a fixed format that can be read by the Department's IBML scanners.

Substitute scannable forms **MUST** meet requirements as established in this document and our Forms Reproduction Policy and be approved prior to release or distribution.

GENERAL INFORMATION**1. Substitute Form**

- Substitute scannable forms must be created according to Department specifications and be approved prior to release or distribution.
- All forms and variable data must have a high standard of legibility for printing.
- Photocopies of the scannable form must not be submitted to the Department for processing.

2. Paper and Ink

- The paper size is 8.5 inches by 11 inches, the same size as the Department's original form. The paper weight must be at least 20 pound white bond and the page orientation is portrait.
- Black ink should be used in printing the text on the form and the variable data.

3. Variable Data

- All variable data fields must utilize 12 pt Courier font, and all variable text data must be in uppercase letters. Text labels must not touch variable data.
- All variable data fields require exact placement.
- Use a bold X (**X**) as a checkbox indicator. See exhibit for exact placement. The use of a checkmark is not acceptable.

4. Variable Data Delimiters

- The 1st Period End, Period Begin, Period End, Tax Year Begin, and Tax Year End fields must be printed with spaces between the dash (-) delimiters. For example:
MM - DD - YY
(2 digits for the month, followed by a space, followed by a dash (-), followed by a space, followed by 2 digits for the day, followed by a space, followed by a dash (-), followed by a space, followed by 2 digits for the year).
- Taxpayer's Hawaii Tax I.D. Number should be printed with spaces between the dash (-) delimiters. For example:

12345678 - 01

(8 digits, followed by a space, followed by a dash (-), followed by a space, followed by 2 digits).

Note: The Taxpayer's Hawaii Tax ID Number begins with a "W". The W should be hardcoded on the form. If the "W" is not hardcoded on the form, the W must be included in the variable data field.

5. Dollar Amounts

123456789 . 12

- Do not use commas as thousand separators.
- Amounts are right justified.
- Dollar and cent signs should not be used.

6. Testing and Approval of the Scannable Form

- The printed 6x10 grid of the form on acetate overlays should be used to verify the exact data field placement. Although the form was revised for 2010, the placement of the variable data has not changed from last year and to help minimize costs, please use the acetate overlays from last year. If you do not have the overlays from last year, please contact the Forms Coordinator. Verify your test data filled facsimile samples with the overlays prior to submitting them for testing. If the samples do not match the overlays within 1/16", do not submit them for approval as they will be rejected.
- A minimum of 5 hardcopy test samples must be provided to ensure proper testing including 1 hardcopy test sample that contains all maximized fields (one alpha "X" or numeric "9" character space with no leading or trailing spaces).
- Test samples must be originals. Photocopies, fax submissions, etc. will not be accepted.
- Test samples must be populated with unique sample variable data showing different scenarios.
- It will require 1 to 2 weeks, upon receipt by the Department, to verify the accuracy of the submitted samples.
- Approval of the facsimile must be obtained from the Department **prior** to filing.

SCANNABLE SPECIFICATIONS

1. Layout

- The form was designed on a 6x10 grid. See exhibits.
- Open space around variable data fields should be adhered to as much as possible. Do not place any additional information in these areas.

2. Hawaii Vendor I.D. Number

- Print your 2-digit Hawaii Vendor I.D. Number following the "ID NO" label at the following positions:
Row 63 at columns 19 and 20
- See our Hawaii software vendor website for your Hawaii Vendor I.D. Number. If your company is not listed, please contact the Forms Coordinator.

3. Registration Marks

- Registration marks are required on the form. The scanning equipment looks for "Ls", or registration marks. Exact placement of the registration marks are required.
- The vertical and horizontal edges of the registration marks must be the same length of .5 inch long and .0278 inch thick.
- There are **two** registration marks on the form.
 1. The top right registration mark should extend from the beginning of column 76 to the end of column 80 and should rest at the top of row 52.



2. The bottom left registration mark should start at the beginning of column 6 and extend through the end of column 10 and rest on the top of row 64.



- The tolerance is 1mm ($\frac{1}{4}$ of a grid).
- No data or other stray marks are allowed to encroach within the white space in a .5 inch square of the registration mark.



4. Barcode

- A 1-D barcode is specific to the form. The property of the 1-D symbology barcode uses 3 of 9 (Code 39).
- Placement of the barcode is approximately at the top of row 47 and at the beginning of column 6.
- Height of the barcode is .5 inch.
- Length of the barcode is approximately 2 inches.
- Density of narrow bar width is set to 20 mils with resolution set to 300 dpi.
- Narrow to Wide Ratio is set to 2.
- Open space surrounding the barcode should be adhered to as much as possible.
- DO NOT stretch the barcode image.
- The required barcode is XBT101 for the form:



XBT101

The barcode includes the form number code (XB), type of form (T), form year (10), and page number (1). There are no hyphens.

- Use of the Department of Taxation's JPEG file of the barcode is preferable. The JPEG files can be found at our software vendor website.
- DO NOT use Windows Metafile Format (wmf). This format causes a very low read rate by the Department's IBML scanners.

5. Acetate overlays

- Although the form was revised for 2010, the placement of the variable data has not changed from last year and to help minimize costs, please use the acetate overlays from last year. If you do not have the acetate overlays from last year, contact the Forms Coordinator.

STATE OF HAWAII — DEPARTMENT OF TAXATION
GENERAL EXCISE/USE, EMPLOYER'S
WITHHOLDING, TRANSIENT ACCOMMODATIONS
AND RENTAL MOTOR VEHICLE &
TOUR VEHICLE SURCHARGE

TAX PAYMENT VOUCHER

GENERAL INSTRUCTIONS

PURPOSE OF FORM

Use this form if you are submitting Form BB-1 or BB-1X, or when you send a payment to the Department of Taxation for your general excise/use, employer's withholding, transient accommodations, and rental motor vehicle & tour vehicle surcharge taxes. Using Form VP-1 allows us to process your payment accurately and efficiently.

HOW TO COMPLETE FORM

- 1) Print your name in the space provided.
2) Enter the last 4 digits of your FEIN or SSN in the space provided.
3) Check the appropriate "Tax Type" box.
4) Check the appropriate "Filing Type" box and fill in the period or year in the space provided.
If you are filing a Form BB-1 or BB-1X, check the box "License Fee". Enter the last day of your first filing period. (e.g., you are a calendar year quarterly filer and began business on January 21, 2011, your first filing period end date is 03/31/11)
5) Print your Hawaii Tax I.D. No. and the amount of your payment in the space provided. If you are applying for a new number, please leave this area blank.
6) Make your check or money order payable in U.S. dollars to the "Hawaii State Tax Collector". Make sure your name, tax type, filing period, and Hawaii Tax I.D. No. appear on your check or money order. Do not postdate your check. Do not send cash.

WHERE TO FILE

Detach Form VP-1 along the dotted line. If you are filing Form BB-1 or BB-1X, attach your payment and Form VP-1 to the front of your form and send to the Forms BB-1 and BB-1X mailing address noted below. If you are making a tax payment, send the Form VP-1 and your payment to the mailing address noted below for the type of tax you are paying. The mailing addresses are as follows:

GENERAL EXCISE/USE TAX

HAWAII DEPARTMENT OF TAXATION
P.O. BOX 1425
HONOLULU, HI 96806-1425

WITHHOLDING TAX

HAWAII DEPARTMENT OF TAXATION
P.O. BOX 3827
HONOLULU, HI 96812-3827

TRANSIENT ACCOMMODATIONS TAX AND RENTAL MOTOR VEHICLE & TOUR VEHICLE SURCHARGE TAX

HAWAII DEPARTMENT OF TAXATION
P.O. BOX 2430
HONOLULU, HI 96804-2430

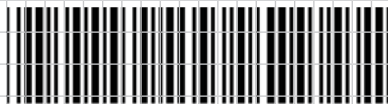
FORMS BB-1 and BB-1X

HAWAII DEPARTMENT OF TAXATION
P.O. Box 1425
HONOLULU, HI 96806-1425

Form (Rev. 2010) DETACH HERE DO NOT WRITE OR STAPLE IN THIS SPACE

VP-1

STATE OF HAWAII — DEPARTMENT OF TAXATION
TAX PAYMENT VOUCHER



DO NOT SUBMIT A PHOTOCOPY OF THIS FORM

XBT101

Name (Please print): ABCDEFGHIJKLMNOPQRSTUVWXYZ123

Tax Type (check only 1)

Filing Type (check only 1) Enter Date as MM DD YY

X General Excise (GE)

X License Fee

1st Period End 12 - 12 - 12

X Transient Accommodations (TA)

X Periodic Return

Period Begin 12 - 12 - 12

X Hawaii Withholding (WH)

Period End

12 - 12 - 12

X Rental Motor & Tour Vehicle (RV)

X Annual Return

Tax Year Begin 12 - 12 - 12

Tax Year End 12 - 12 - 12

Print the amount of your payment in the space provided. ATTACH THIS VOUCHER WITH CHECK OR MONEY ORDER PAYABLE TO "HAWAII STATE TAX COLLECTOR" Write the tax and filing types, and your Hawaii Tax I.D. Number on your check or money order.

Last 4 Digits of Your FEIN or SSN

1234

Hawaii Tax I.D. Number

12345678 - 12

Amount of Payment

123456789.12

ID NO 12

STATE OF HAWAII — DEPARTMENT OF TAXATION
GENERAL EXCISE/USE, EMPLOYER'S
WITHHOLDING, TRANSIENT ACCOMMODATIONS
AND RENTAL MOTOR VEHICLE &
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- 5) Print your Hawaii Tax I.D. No. and the amount of your payment in the space provided. If you are applying for a new number, please leave this area blank.
- 6) Make your check or money order payable in U.S. dollars to the "**Hawaii State Tax Collector**". Make sure your name, tax type, filing period, and Hawaii Tax I.D. No. appear on your check or money order. Do not postdate your check. **Do not send cash.**

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**TRANSIENT ACCOMMODATIONS TAX
AND**

RENTAL MOTOR VEHICLE & TOUR VEHICLE SURCHARGE TAX

HAWAII DEPARTMENT OF TAXATION
P.O. BOX 2430
HONOLULU, HI 96804-2430

FORMS BB-1 and BB-1X

HAWAII DEPARTMENT OF TAXATION
P.O. Box 1425
HONOLULU, HI 96806-1425

✂ — — — — — DETACH HERE — — — — — ✂

Form (Rev. 2010)

STATE OF HAWAII — DEPARTMENT OF TAXATION
TAX PAYMENT VOUCHER

DO NOT WRITE OR STAPLE IN THIS SPACE

VP-1



DO NOT SUBMIT A PHOTOCOPY OF THIS FORM

XBT101

Name (Please print): ABCDEABCDEF GHIJKLMNOPQRSTUVWXYZ123

Print the amount of your payment in the space provided. ATTACH THIS VOUCHER WITH CHECK OR MONEY ORDER PAYABLE TO "HAWAII STATE TAX COLLECTOR" Write the tax and filing types, and your Hawaii Tax I.D. Number on your check or money order.

Tax Type (check only 1)

Filing Type (check only 1) Enter Date as MM DD YY

General Excise (GE)

License Fee
1st Period End 12 - 12 - 12

Transient Accommodations (TA)

Periodic Return
Period Begin 12 - 12 - 12

Hawaii Withholding (WH)

Period End 12 - 12 - 12

Rental Motor & Tour Vehicle (RV)

Annual Return
Tax Year Begin 12 - 12 - 12

Tax Year End 12 - 12 - 12

Last 4 Digits of Your FEIN or SSN

1234

Hawaii Tax I.D. Number

W

12345678 - 12

Amount of Payment

123456789.12

ID NO 12