FORM GEW-TA-RV-6
(REV. 2018)

STATE OF HAWAII — DEPARTMENT OF TAXATION

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APPLICATION FOR EXTENSION OF TIME TO FILE THE GE/USE TAX ANNUAL RETURN & RECONCILIATION (FORM G-49), THE TA TAX ANNUAL RETURN & RECONCILIATION (FORM TA-2), OR THE RVST ANNUAL RETURN & RECONCILIATION (FORM RV-3)

NOTE: This form may be filed and payment made electronically with the Department of Taxation (Department). For more information, go to **tax.hawaii.gov/eservices.**

Use this form to request a 3-month extension of time to file the General Excise/Use Tax Annual Return & Reconciliation (Form G-49), the Transient Accommodations Tax Annual Return & Reconciliation (Form TA-2), or the Rental Motor Vehicle, Tour Vehicle and Car-Sharing Vehicle Surcharge Tax Annual Return & Reconciliation (Form RV-3). Enter the Hawaii Tax I.D. No. for the tax for which you are requesting an extension (e.g., GE-XXX-XXX-XXXX-XX). If additional time is needed, a second 3-month extension may be requested using this form. The maximum allowable extension period is 6 months. Provide a full explanation for why an extension is needed on line d. A valid and compelling reason (e.g., hospitalization of taxpayer) for the extension must exist before the Department will approve an extension.

This extension of time to file is **not** an extension of time to pay. If additional taxes are due for the year, write the amount due on line e. Your check or money order for the entire amount, payable to "**Hawaii State Tax Collector**" in U.S. dollars drawn on any U.S. bank must be attached to the completed Form GEW-TA-RV-6 and submitted to the Department on or before the original due date of the return. Write "GEW-TA-RV-6," the tax type, the tax year, and your Hawaii Tax I.D. No. on your check or money order. If you are requesting a second 3-month extension, this form must be completed and submitted to the Department on or before the expiration of the initial 3-month extension. Applications for extensions filed after these dates will not be granted. This form must be signed by a person who is authorized to sign the annual return (Form G-49, Form TA-2, or Form RV-3) or by a duly authorized agent.

IMPORTANT: An approved application for extension is valid only if all monthly, quarterly, or semiannual periodic returns (Form G-45, Form TA-1, or Form RV-2) and tax payments for the year have been filed and paid, and the balance, if any, of the properly estimated tax due for the year was paid with the initial application for extension. Form G-49, Form TA-2, or Form RV-3, along with the payment of any tax to the extent not already paid, must be filed on or before the expiration of the approved extension. Failure to meet these conditions will result in the extension being deemed invalid and penalties and interest shall be assessed on the amount of tax owed as if no extension had been granted.

ATTACH YOUR CHECK OR MONEY ORDER HERE

Check ONE (1) type of return to be filed:

☒ **Form G-49** ☒ **Form TA-2** ☒ **Form RV-3**

HAWAII TAX I.D. NO. GE 123 456 7890 01

Last 4 digits of your FEIN or SSN: 9999

Taxpayer's/Operator's/Lessor's Name
TAXPAYER NAME XXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXX

Trade Name or Doing Business As (DBA) Name
DOING BUSINESS AS NAME XXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXX

Address (Number and Street)
ADDRESS XXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXX

City, State, and Postal/Zip Code
CITY STATE ZIP CODE XXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXX

APPLICATION is hereby made for an extension of time to file the GE/USE Tax, TA Tax, or, RVST Annual Return & Reconciliation as indicated by the check mark for the one (1) type of return marked above:

a. For: ☒ calendar year ending December 31, 20 99 or ☒ fiscal year ending (MM/DD/YY) 999999

b. An extension is requested until: (MM/DD/YY) 999999
(No more than 3 months. See Instructions)

c. Were you previously granted an extension of time to file this return?
☒ Yes ☒ No
If yes, previous extension was granted to: (MM/DD/YY) 999999

d. This extension is necessary for the following reasons (See Instructions below):
EXPLANATION XXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXX
EXPLANATION XXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXX
EXPLANATION XXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXX

e. **ADDITIONAL TAXES DUE. (If no payment is due, enter "0.") (See Instructions below.)** ..... $ 999999999.00

DECLARATION: I declare under the penalties set forth in section 231-36, HRS, that the statements contained herein are true and correct, prepared in accordance with the provisions of the GE and Use Tax Laws, the TA Tax Law, or the RVST Law and the rules issued thereunder.

Signature of Owner, Partner or Member, Officer, Operator, Lessor, or Duly Authorized Agent

PRINT NAME XXXXXXXXXXXXXX	TITLE XXXXXXXXXXXX	12-12-1212	(999) 999-9999
Print Name of Signatory	Title	Date	Daytime Phone Number

Mailing Address:
Hawaii Department of Taxation
P. O. Box 2430
Honolulu, HI 96804-2430

For More Information:
Website: **tax.hawaii.gov**
Telephone: 808-587-4242
Toll Free: 1-800-222-3229

Human Readable text here

ID NO XX