STATE OF HAWAII DEPARTMENT OF TAXATION



General Information and Scannable Specifications for Form VP-1 (Rev. 2021)

Contact Information for General Questions

Hawaii Department of Taxation
Technical Section
Attn: Sharlene Tagami, Forms Coordinator
830 Punchbowl Street, Rm 126
Honolulu, Hawaii 96813

Telephone: (808) 587-1577 Fax: (808) 587-1584

E-mail: Tax.Technical.Section@hawaii.gov

Contact Information for Mailing Test Packages and Testing Inquiries

Hawaii Department of Taxation Attn: Document Processing — Quality Assurance Test Team 830 Punchbowl Street, Rm 126 Honolulu, Hawaii 96813

Email: tax.dp.qa@hawaii.gov

Form VP-1 (Rev. 2021)

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

- We highly recommend you use the Department's official Form VP-1 PDF.
- If you do not use the Department's official PDF, the substitute form must match the Department's form in layout and appearance including **bold** and/or *italics* fonts as they appear on the official form.
- Lines of text in a paragraph must break at the same location as the official form.
- All forms and variable data must have a high standard of legibility for printing.
- Photocopies of the scannable form must be submitted to the Department for processing.
- Substitute scannable forms must be proofread prior to submission.

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. Fonts

- The form was designed using the following font:
 - 1. Arial
- The following fonts and sizes should be used for the form number and revision year located at the top left corner of the voucher:

1. Form: 8 pt Arial

2. Rev. 2021: 8 pt Arial

3. VP-1: 12 pt Arial Bold

4. Variable Data

- All variable data fields must utilize 12 pt Courier New font.
- · All variable data fields require exact placement.
- Print all alpha characters uppercase.

 Use a bold X (X) as a checkbox indicator. See exhibit for exact placement. The use of a checkmark is not acceptable.

5. Variable Data Delimiters

 The 1st Period End, Period End, and Tax Year End fields must be printed with dash (-) delimiters. For example:

MM-DD-YY

(2 digits for the month, followed by a dash (-), followed by 2 digits for the day, followed by a dash (-), followed by 2 digits for the year).

 Taxpayer's Hawaii Tax I.D. Number should be printed with the dash (-) delimiters. For example:

GE-123-456-7890-01 (GET) TA-123-456-7890-01 (TAT) WH-123-456-7890-01 (Withholding) RV-123-456-7890-01 (Rental Motor Vehicle, Tour Vehicle and Car Sharing Vehicle Surcharge).

(2 digit tax type, followed by a dash (-), followed by 3 digits, followed by a dash (-), followed by 3 digits, followed by a dash (-), followed by 4 digits, followed by a dash (-), followed by 2 digits).

6. Dollar Amounts

123456789.12

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

7. Testing and Approval of the Scannable Form

- 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 tailing 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.

Page 3

- Test samples must include only the voucher portion of the form and must be cut where indicated.
- 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 except for the areas that do not require optical character recognition. 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 position:
 - 1. Page 1: The 2-digit Hawaii Vendor I.D. Number should begin at column 43, row 64.
- The Hawaii Vendor I.D. Number must utilize 12 pt Courier New font.

3. QR Code

- A QR code is specific to the form. The property of the 2D symbology QR code is measured in CM.
- Placement of the QR code is as follows (see exhibit for exact placement):
 - Page 1: The left bottom corner of the QR code is between columns 8 and 9 and at the bottom of row 49.
- · Height of the QR code is 0.5 inch.
- Length of the QR code is 0.5 inch.
- Narrow Module Size is set to 0.18.
- Margin is set to 0.18.
- Open space surrounding the QR code should be adhered to as much as possible.
- DO NOT stretch the QR code image.

 The required QR code is VP1_T 2021A 01 VIDXX

The QR code includes the form number (VP1), an underscore, type of form (T), space, 4-digit form year (2021), 1-letter revision indicator (A), space, 2-digit page number (01), space, vendor I.D. label (VID), and your 2-digit Hawaii Vendor I.D. Number (XX). There are no hyphens.

- The human readable text for the QR code MUST be printed below the QR code at column 6, row 50, utilizing 6 pt Arial font.
- DO NOT use Windows Metafile Format (wmf). This format causes a very low read rate by the Department's IBML scanners.

4. Form Serial Number

- The form serial number must be printed at column 6, row 64, utilizing 12 pt Courier New font.
- The required form serial number is: VP-1C0S1
- Please note that the sixth digit is the number 0.

5. Acetate Overlays

- Acetate overlays will assist in the exact data field placement. Verify your form samples with the overlays prior to submitting them for testing. If the samples do not match the overlays within 1/16 inch, do not submit them for approval as they will be rejected.
- Acetate overlays will be mailed to vendors who submitted a Letter of Intent to participate in the Forms Reproduction Program and who will be reproducing Form VP-1. If you did not receive the acetate overlays, please contact the Forms Coordinator.

FORM VP-1 (REV. 2021)

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14 16

⁶P⁸1¹⁰0¹²1¹⁴

 36 I 38

NO⁴²

STATE OF HAWAII -- DEPARTMENT OF TAXATION GENERAL EXCISE/USE: TRANSIENT ACCOMMODATIONS: RENTAL MOTOR VEHICLE, TOUR VEHICLE & CAR-SHARING VEHICLE SURCHARGE; AND HAWAII WITHHOLDING

40 42 44 46

TAX PAYMENT VOUCHER

GENERAL INSTRUCTIONS

CHANGES YOU SHOULD NOTE

18 20 22

If payment is submitted with a return (general excise/use, transient accommodations, withholding and rental motor vehicle, tour vehicle & car-sharing vehicle surcharge), DO NOT attach Form VP-1 to the tax return.

30 32

INTERNET FILING

Form VP-1 can be filed and paid electronically through the State's Internet portal. For more information, go to tax.hawaii.gov/eservices/.

PURPOSE OF FORM

Use this form ONLY if submitting Form BB-1 or submitting a payment without a tax return.

HOW TO COMPLETE FORM

- 1) Print the name in the space provided.
- 2) Check the appropriate "Tax Type" box.
- 3) Check the appropriate "Filing Type" box and fill in the period or year in the space provided. If filing Form BB-1, check the box "License Fee." Add lines 22b through 22f on Form BB-1 and enter the amount of payment in the space provided. Enter the last day of the first filing period. For example. for a calendar year quarterly filer who began business on January 21, 2021, the first filing period end date is 03-31-21.
- In the space provided, print the Hawaii Tax I.D. No. starting with the tax type (i.e. GE, TA, WH or RV), the 10 digit account number with the 2 digit extension; and the amount of payment.

5) Make the check or money order payable in U.S. dollars to the "Hawaii State Tax Collector." Make sure the name, tax type, filing period, and Hawaii Tax I.D. # appear on the check or money order. Do not postdate the check. Do not send cash.

WHERE TO FILE

48 50 52 54 56 58 60 62

Detach Form VP-1 along the dotted line. If filing Form BB-1, attach the payment and Form VP-1 to the front of the Form 19 BB-1 and mail to the address for Form BB-1 below. If submitting 20 only a tax payment (without a return), mail Form VP-1 and the payment to the address listed below for the type of tax. The mailing addresses are as follows:

> General Excise/Use Tax Hawaii Department of Taxation P.O. Box 1425 Honolulu, HI 96806-1425

Transient Accommodations Tax And Rental Motor Vehicle, Tour Vehicle & Car-Sharing Vehicle Surcharge Tax

> Hawaii Department of Taxation P.O. Box 2430 Honolulu, HI 96804-2430

> Hawaii Withholding Hawaii Department of Taxation P.O. Box 3827 Honolulu, HI 96812-3827

> Form BB-1 Hawaii Department of Taxation P.O. Box 1425 Honolulu, HI 96806-1425

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4 Form (1	Rev. 2021)		— — — DEI	ACH HERE		44
_		ATE OF	HAWAII DEPARTM	ENT OF TAXATION	DO NOT WRITE OR STAPLE IN THIS SPACE	45
16		Т	AX PAYMENT VO	UCHER		46
17 I	Place					47
QR Code			DO NOT SUBMIT A PHOTOCOPY OF THIS FORM			
.l	Here					49
0	adable text here					50
Name (Please print): ABCDEFGHIJKLMNOPQRSTUVWXYZ12345678 Print the amount of your payment in the space						51
2 Tax Type (check only 1)		Filin	g Type (check only 1) E	inter Date as MM-DD-YY	provided. ATTACH THIS VOUCHER WITH CHECK OR MONEY ORDER PAYABLE TO	52
53						53
₅₄ X (General Excise (GE)	X	License Fee		tax and filing types, and your Hawaii Tax I.D. Number on your check or money order.	54
55			1st Period End	12-12-12		55
6 X	Transient Accommodations (TA)					56
57		X	Periodic Return		Hawaii Tax I.D. Number	57
58 X 1	Hawaii Withholding (WH)		Period End	12-12-12		58
59					GE-123-456-7890-01	59
o X 1	Rental Motor, Tour & Car-Sharing	X	Annual Return		Amount of Payment	60
51	Vehicles (RV)		Tax Year End	12-12-12		61
52					123456789.12	62

FORM VP-1 (REV. 2021)

STATE OF HAWAII — DEPARTMENT OF TAXATION **GENERAL EXCISE/USE; TRANSIENT ACCOMMODATIONS;** RENTAL MOTOR VEHICLE, TOUR VEHICLE & CAR-SHARING **VEHICLE SURCHARGE; AND HAWAII WITHHOLDING**

TAX PAYMENT VOUCHER

GENERAL INSTRUCTIONS

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Form BB-1

Hawaii Department of Taxation P.O. Box 1425 Honolulu, HI 96806-1425

Amount of Payment

123456789.12

DETACH HERE Form (Rev. 2021) DO NOT WRITE OR STAPLE IN THIS SPACE STATE OF HAWAII — DEPARTMENT OF TAXATION VP-1 TAX PAYMENT VOUCHER Place DO NOT SUBMIT A PHOTOCOPY OF THIS FORM QR Code Here Human Readable text here Name (Please print): ABCDEFGHIJKLMNOPQRSTUVWXYZ12345678 Print the amount of your payment in the space provided. ATTACH THIS VOUCHER WITH Filing Type (check only 1) Enter Date as MM-DD-YY Tax Type (check only 1) . CHECK OR MONEY ORDER PAYABLE TO "HAWAII STATE TAX COLLECTOR." Write the tax and filing types, and your Hawaii Tax I.D. X X License Fee General Excise (GE) Number on your check or money order. 12-12-12 1st Period End X Transient Accommodations (TA) X Periodic Return Hawaii Tax I.D. Number 12-12-12 X Period Fnd Hawaii Withholding (WH) GE-123-456-7890-01 X

12-12-12

VP-1C0S1 ID NO XX

Rental Motor, Tour & Car-Sharing

Vehicles (RV)

X Annual Return

Tax Year End