STATE OF HAWAII DEPARTMENT OF TAXATION



General Information and Scannable Specifications for Form RV-3 (Rev. 2019)

Contact Information for General Questions

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FORM RV-3 (Rev. 2019)

General Information and Scannable Specifications

This document provides software vendors with the requirements for reproducing Form RV-3. Form RV-3 is designed for electronic scanning that permits faster processing with fewer errors. Software developers who reproduce, develop, or distribute Form RV-3 must create the form so the variable data (specified fields containing

GENERAL INFORMATION

1. Substitute Form

- We highly recommend you use the Department's official Form RV-3 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 not 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 fonts:
 - 1. Helvetica
 - 2. Times New Roman
- The following fonts and sizes should be used for the form number and revision year located at the top left corner of the form:
 - 1. Form RV-3: 10 pt Helvetica bold
 - 2. Rev. 2019: 8 pt Helvetica
- The following font and size should be used for the form number and revision year located at the bottom right corner of the form:
 - 1. Form RV-3 (Rev. 2019): 8 pt Helvetica

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

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

4. Variable Data

- All variable data fields must utilize 12 pt Courier Font.
- All variable data fields require exact placement.
- Print all alpha characters uppercase.
- Use a bold X (X) as a checkbox. See exhibit for exact placement. The use of a checkmark is not acceptable.

5. Variable Data Delimiters

• Tax Year Ending must be printed with dash (-) delimiters. For example:

MM-DD-YY

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

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

123-456-7890-01

(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)

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

999999999999.99

6. Dollar Amounts

- Do not use commas as thousand separators.
- Do not use leading signs.
- Amounts are right justified.
- Fields with dollar amounts that are not rounded to whole dollar amounts must be followed by a decimal point showing "00" for cents if the amount is a whole dollar value.
- 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

Form RV-3 (Rev. 2019) General Information and Scannable Specifications

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.

SCANNABLE SPECIFICATIONS

1. Hawaii Vendor I.D. Number

- Print your 2-digit Hawaii Vendor I.D. Number following the "ID NO" label (see exhibit for exact placement).
 - 1. Page 1: The 2-digit Hawaii Vendor I.D. Number should begin at column 45, row 64.
 - 2. Page 2: The 2-digit Hawaii Vendor I.D. Number should begin at column 45, row 64.

2. 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):
 - 1. Page 1: The left bottom corner of the QR code is at the beginning of column 6 and at the bottom of row 8.
 - 2. Page 2: The left bottom corner of the QR code is at the beginning of column 6 and at the bottom of row 8.
- 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.

- It will require 1 to 2 weeks, upon receipt by the Department, to verify the accuracy of the submitted sample.
- Approval of the facsimile must be obtained from the Department **prior** to filing.
- The required QR code for page 1 is RV3_T 2019A 01 VIDXX

The required QR code for page 2 is RV3_T 2019A 02 VIDXX

The QR code includes the form number (RV3), an underscore, type of form (T), space, 4-digit form year (2019), 1-letter revision indicator (A), space, 2-digit page number (01) or (02), and vendor ID number. There are no hyphens.

- Please do not print the outline around the human readable text and QR code. These were only used to show the placement of the human readable text and QR code.
- DO NOT use Windows Metafile Format (wmf). This format causes a very low read rate by the Department's IBML scanners.

3. 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 Form Reproduction Program and who will be reproducing Form RV-3. If you did not receive the acetate overlays, please contact the Forms Coordinator.

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	(Re	ORM RV-3 Rev. 2019) STATE OF HAWAII — DEPARTMENT OF TAXATION RENTAL MOTOR VEHICLE, TOUR VEHICLE, AND CAR-SHARING VEHICLE SURCHARGE TAX ANNUAL RETURN & RECONCILIATION DO NOT WRITE IN TO DO NOT WRITE I					E IN THIS	AREA		98		
	2	^K Place an "X" in this box ONLY if this is an AMENDED return										
		TAX YEAR ENDING	M M D D Y Y Y Y 12-12-121	-		HΔWZ		x i.d. no. RV	123	-456-7890-	- 0-1	
			R NAMEXXXXXXXXX	_				Last 4 digits of		с	1234	1
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			COLUMN A Car-Sharing Vehicle		OLUN al Moto	VIN B or Vehicl	e	COLUMN Tour Vehicle Surcha	rge Tax —	COLUMN D Tour Vehicle Surcharge	eTax —	
HERE•			Surcharge Tax — Enter the Number of Car-Sharing Vehicle Half-Hours	Surchar Number of Days AF	r ge Tax f Renta	– Ente I Motor V	r the 'ehicle	Tour Vehicle Surcharge Tax — Enter the Number of Tour Vehicles Carrying 8 - 25 Passengers AFTER December 31, 2018		Tour Vehicle Surcharge Enter the Number of Tour Carrying 26 or More Pase AFTER December 31,	sengers	
ORDER	1	OAHU DISTRICT	9999999999999	9999	999	9999	99	9999999	99999	9999999999	999	1
	2	MAUI DISTRICT	99999999999999	9999	999	9999	99	9999999	99999	9999999999	999	2
MONEY	3	HAWAII DISTRICT	99999999999999	9999	999	9999	99	99999999999999		99999999999999		3
ОВ	4	KAUAI DISTRICT	99999999999999	9999	99999999999999		99999999999999		99999999999999		4	
CHECK	5	TOTALS (Add lines 1 through 4)	99999999999999	9999	999:	9999	99			9999999999	999999	
л С	6	RATES	\$0.25		\$5	5		\$16		\$66		6
ATTACH	7	TAXES (Multiply line 5 by line 6)	99999999999.99	9999	999	999	00	9999999	99 00	9999999999	00	7
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	11	. TOTAL AMOUNT. Add lines	9 and 10. • • • • • • • • • • •							9999999999	.99	11
	12	. TOTAL TAXES PAID on Form						000000				
	13	is an Amended return) less an Additional assessments paid	,	,		12 13		99999999 99999999		-		
		. PENALTIES \$9999999.9				14		9999999		-		
	15	. TOTAL PAYMENTS MADE FO	OR THE TAX YEAR. (Add lines	s 12 thru 1	4)	15		9999999				
	16	. CREDIT CLAIMED ON ORIGINAL	ANNUAL RETURN. (For Amended F	Return ONLY).	16		9999999	99.99			L
		. NET PAYMENTS MADE. Line									.99	17
		. CREDIT TO BE REFUNDED.								999999999999999999999999999999999999999	.99	18
					ENAL			9999999	 99 <mark>.</mark> 99			19
	20	. FOR LATE FILIN	IG ONLY →	IN	ITERE	EST		9999999	99.99			20
		. TOTAL AMOUNT DUE AND	,	,						99999999999	.99	21
	22	PLEASE ENTER THE AMOU "HAWAII STATE TAX COLLEC phone number on your check or more	CTOR" to Form RV-3. Write "RV	/," the filing p	eriod, y	our Haw	aii Tax I	I.D. No., and your daytin		9999999999	.99	22
		DECLARATION: I declare, under the penalties set forth in section 231-36, HRS, that this is a true and correct return, prepared in accordance with the provisions of the Motor Vehicle, Tour Vehicle, and Car-Sharing Vehicle Surcharge Tax Law and the rules issued thereunder. IN THE CASE OF A CORPORATION OR PARTNERSHIP, THIS RETURN MUST BE SIGNED BY AN OFFICER, PARTNER OR MEMBER, OR DULY AUTHORIZED AGENT.								of the Re	ental	

		12-12-12	<u>(123)999-9999</u>
SIGNATURE	TITLE	DATE	DAYTIME PHONE NUMBER

ID NO XX

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FORM RV-3 (REV. 2019)

Place QR Code Here

(Name: TAXPAYER NAMEXXXXXXXXXXXXXXXXXXXXXXXXXXX	
	HAWAII TAX I.D. No. RV 123-456-7890-01 MM DD YYY	Y
	Last 4 digits of your FEIN or SSN 1234 TAX YEAR ENDING 12 - 12 - 12	12

	DUAL RATE SECTION — To be Completed by Taxpayers whose Tax Year includes dual rates									
		COLUMN B	COLUMN C	COLUMN D						
Rental Motor Vehicle SurchargeTax — Enter the Number of Rent Motor Vehicle Days BEFORE July 1, 2019			Tour Vehicle Surcharge Tax — Enter the Number of Tour Vehicles Carrying 8 - 25 Passengers BEFORE January 1, 2019	Tour Vehicle Surcharge Ta Enter the Number of To Vehicles Carrying 26 o More Passengers BEFORE January 1, 20	our or					
1	OAHU DISTRICT	9999999999999	99999999999999	999999999999	9	1				
2	MAUI DISTRICT	9999999999999	9999999999999	999999999999	9	2				
3	HAWAII DISTRICT	9999999999999	9999999999999	9999999999999		3				
4	KAUAI DISTRICT	9999999999999	9999999999999	9999999999999		4				
5	TOTALS (Add lines 1 through 4)	9999999999999	9999999999999	999999999999	9	5				
6	RATES	\$3	\$15	\$65		6				
7	TAXES (Multiply line 5 by line 6)	99999999999999999999	999999999999999999999	99999999999	00	7				
8	Add line 7, Columns B, C and	D and enter the result here a	nd on page 1, line 8	99999999999	00	8				