STATE OF HAWAII DEPARTMENT OF TAXATION



General Information and Scannable Specifications for Form RV-3 (REV. 2023)

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 RV-3 (REV. 2023)

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. Arial
 - 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 Arial bold
 - 2. REV. 2023: 8 pt Arial
- 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. 2023): 8 pt Arial

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 New 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.

6. Dollar Amounts

999999999999.99

- 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 fields (one alpha "X" or numeric "9" character space with no leading or tailing spaces).

Form RV-3 (REV. 2023) General Information and Scannable Specifications

- 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 sample.
- Approval of the facsimile must be obtained from the Department **prior** to filing.
- Form RV-3 (REV. 2023) cannot be filed before 2024.

SCANNABLE SPECIFICATIONS

1. Layout

• 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 positions:
 - 1. Pages 1 2: The 2-digit Hawaii Vendor I.D. Number should begin at column 42, 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):
 - 1. Page 1: The left bottom corner of the QR code is at the beginning of column 6 and between rows 7 and 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.
- The required QR code for page 1 is RV3_T 2023A 01 VIDXX

The required QR code for page 2 is RV3_T 2023A 02 VIDXX

The QR code includes the form number (RV3), an underscore, type of form (T), space, 4-digit form year (2023), 1-letter revision indicator (A), space, 2-digit

- page number (01) or (02), and vendor ID number. There are no hyphens.
- The human readable text for the QR code MUST be printed below the QR code, utilizing 6 pt Arial font. Placement of the human readable text is as follows (see exhibits for exact placement):
 - 1. Page 1: Column 6, between rows 8 and 9
 - 2. Page 2: Column 6, row 9
- 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.

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 for page 1 is: RV31C0S1

The required form serial number for page 2 is: RV32C0S1

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

RE (ORM RV-3 STATE REV. 2023) RENTAL MO Place SHA QR Code ANN Here For Tax	OF HAWAIT — DEPARTME TOR VEHICLE, TOUR RING VEHICLE SURC UAL RETURN & RECO Years Ending After Do	NT OF TAX VEHICLE CHARGE DNCILIA1 ecember	e, and C Tax Ton			58 60 62 64 /RITE IN THIS	66 68 70 72 7 AREA	4 76 78	80 82 98 6 7 8
	Human Readable text here X Place an "X" in t	And Before January		AMEN	DED	return				9 10
-		M M D D Y Y Y								11
	TAX YEAR ENDING	12-12-1212	H/	WAII TA	X I.D. I	NO. RV	123-45	6-7890-01		13
	NAME:TAXPAYEI	R NAME XXXXXXX	XXXXXX	XXXXX	XXX La	ast 4 digits	of your FEI	N or SSN 12	234	14 15 16
		COLUMN A Car-Sharing Vehicle Surcharge Tax — Enter the Number of Car-Sharing Vehicle Half-Hours	Tour Vehic Enter the Nu	DLUMIN B le Surcharge T nber of Tour or More Pass	Vehicles E	Tour Vehicle Se Enter the Numbe	IMIN C urcharge Tax — r of Tour Vehicles 5 Passengers	COLUMNS I Rental Motor Surcharge Tax — C Schedule on page 2 this Column,	Vehicle Complete the then carry to	- 17
1		999999999999999	9999	999999	999	99999	99999999			20 21 22
2		999999999999999	9999	999999	999	99999	99999999			23 23
3	HAWAII DISTRICT	999999999999999	9999	999999	999	99999	99999999	-		35 26
4	KAUAI DISTRICT	999999999999999	9999	999999	999	99999	99999999			47 28
5	TOTALS (Add lines 1 through 4)	999999999999999	9999	999999	999	99999	99999999			5 ⁹ 30
6	RATES	\$0.25		\$66		\$	16			6 ¹ 32
7	TAXES (Multiply line 5 by line 6)	9999999999999.99	9999	999999	00	99999	9999 00	999999999	99.99	33 34
3.	. TOTAL TAXES DUE. Add line for the period, enter "0.00"		ter the resul	t here. If y	ou did n	ot have any	activity	99999999	999.99	35 8 ₆
)	. AMOUNTS ASSESSED DURI	ING THE YEAR		NALTY			9999.99			\mathbf{g}^{37}
				EREST		9999999	9999.99	99999999	<u> </u>	2 30
0	0. TOTAL AMOUNT. Add lines 8	3 and 9		· · · · · · ·	, I			99999999	<u> </u>	
1	1. TOTAL TAXES PAID on Forms is an Amended return) less an			. 11		99999	9999.99			42
2	2. Additional assessments paid f	• • • • • • • • • • • • • • • •	-	. 12			9999.99	1		43 44
3							9999.99			45
	4. TOTAL PAYMENTS MADE FC			3) 14 . 15			9999.99 9999.99	-		46
	 CREDIT CLAIMED ON ORIGINALA NET PAYMENTS MADE. Line 						_	999999999	99.99	41 168
	7 CREDIT TO BE REFUNDED.							999999999		174
8	8 ADDITIONAL TAXES DUE. L	ine 10 minus line 16	<u></u>					999999999	99.99	18
9	9. FOR LATE FILIN			NALTY TEREST			9999 . 99 9999 . 99	9999999999	99.99	5 19
	0. TOTAL AMOUNT DUE AND F							9999999999		20
	1. PLEASE ENTER THE AMOU	NT OF YOUR PAYMENT. At	tach a chec							54
	"HAWAII STATE TAX COLLEC phone number on your check or mor		V," the filing pe	eriod, your Ha	iwai Tax I.	D. No., and you	· daytime			55
	Mail to: HAWAII DEPARTMEN	IT OF TAXATION, P.O. Box '		ulu, HI 968	06-1425			9999999999	19.99	56
	If you are NOT submitting a payme	ent with this return, enter "0.00"	here	<u></u>		· · · · · · · ·	• • • • • • •	₽ <u></u>	┽┽┥┩┿┿╼	2′ I;
	DECLARATION: I declare, und Rental Motor Vehicle, Tour Vehic						turn, prepared in	accordance with the	provisions o	of the $\frac{58}{59}$
	IN THE CASE OF A CORPORATION OR PAR			R, PARTNER OF	XXXXX		12-12		999-99	999
	SIGNATURE		TTLE			DATE		DAYTIME	PHONE NUM	BER

	RV-3 (REV. 2023)				PAGE 2	82 3 4
Plac	e Name	- TAXPAYER NAM	IE XXXXXXXXXXXXXX	XXXXXXXX		5
QRC	ode					7
Her		AII TAX I.D. No. RV	123-456-7890-0	1M	DD YYYY	8
Human	Readable text here		CN 1234 TAY		2-1212	9
	Last	4 digits of your FEIN or S	SN 1231 IAX	YEAR ENDING 12-1		10
						12
						13
		COLUMN D Rental Motor Vehicle	COLUMN E Rental Motor Vehicle	COLUMN F Rental Motor Vehicle		14
	OLUMNS D, E & F	Surcharge Tax — Enter the Number of Rental Motor	Surcharge Tax — Enter the Number of Rental Motor Vehicle	Surcharge Tax — Enter the Number of Rental Motor Vehicle		15
S	CHEDULE	Vehicle Days for reritals	Days for rentals	Days for rentals		16 17
		After December 31, 2022 and Before January 1, 2024	After December 31, 2023 and Before January 1, 2025	After December 31, 2024 and Before January 1, 2026		18
10	AHU DISTRICT				1	19
		99999999999999	99999999999999	99999999999999		20
2 M	AULDISTRICT	999999999999999	9999999999999	99999999999999	2	21
						22 23
3 H	AWAII DISTRICT	99999999999999	99999999999999	99999999999999	3	23
4 K	AUAI DISTRICT				4	25
		99999999999999	99999999999999	99999999999999		26
	DTALS dc lines 1 through 4 of each column)	999999999999999	99999999999999	99999999999999	5	27
<u> </u>		9999999999999999		999999999999999		28
6 R	ATES	\$6	\$6.50	\$7	6	29 30
7 T/	XES (Multiply line 5 by line 6				7	31
in	each Column)	9999999999 00	99999999999.99	9999999999 00		32
li	all of your rental days are Before Jar	nuary 1, 2025*, add line 7, Columns			7D&E	33
		ter result here and on page 1, line 7. are After December 31, 2023 and Be	وسيبص ومراجع وسيرجع ومراجع ومراجع ومراجع ومراجع ومراجع والمراجع			34
$\left \right $	n al or your rental days a		er result here and on page 1, line 7.	99999999999.99	7E&F	35
						36
	~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~	Calendar Year 2024, complete Calendar Year 2025, complete				38
II a	ii of your rental days fail within	Calendar Year 2025, complete				39
						40
						41
						42
						43
						45
						46
						47
						48
						49 50
						51
						52
						53
						54
						55
						56 57
						58
						59
						60
						61
						61
				FORM	RV-3 (REV. 2023) 98	62
Êvå	2 ¹⁰ 0 ¹² 1 ¹⁴ ¹⁶ ¹⁸ ²⁰ ²²	24 26 28 30 32 34 36 38 1 D N	JO XX ⁴⁴ 46 48 50 52	54 56 58 60 62 64 66 68	RV-3 (REV. 2023) 70 72 74 76 78 80	62

	Q	EV. 2023) RENTAL MC Place SH/ PR Code ANN	2023) RENTAL MOTOR VEHICLE, TOUR VEHICLE Code SHARING VEHICLE SURCHA Code ANNUAL RETURN & RECONC Stre For Tax Years Ending After Decer					DO NOT WRITE IN THIS AREA				ļ	98
	Х	Place an "X" in t	this box ONLY if th	is is a	an A	MEN	DED) return					
			MM DD YYYY										
			12-12-1212					us DV	123·	-456	5-7890-01		
		TAX YEAR ENDING			HAW	aii ta	X I.D	. NO. RV					
		NAME:	R NAME XXXXXXX	XXXXX	XXX	XXXX	XXX	Last 4 digits	of you	r FEIN	Nor SSN 1234		
			COLUMN A	COLUMN B			COLUMN C			COLUMNS D,E&F		1	
R HERE			Car-Sharing Vehicle Surcharge Tax — Enter the Number of Car-Sharing Vehicle Half-Hours	Tour Ve Enter the Carrying	Number		/ehicles	Tour Vehicle Se Enter the Numbe Carrying 8 - 2	r of Tour V	ehicles	Rental Motor Vehicle Surcharge Tax — Comple Schedule on page 2 then ca this Column, line 7	te the	
MONEY ORDER	1	OAHU DISTRICT	99999999999999	999	9999	9999	999	99999	9999	999			1
ЕΥО	2	MAUI DISTRICT	AUI DISTRICT 999999999999999999999				999	9999999999999					2
NOM	3	HAWAII DISTRICT	999	9999	9999	999	99999999999999					3	
(OR	4	KAUAI DISTRICT	99999999999999	999	99999999999999		99999999999999					4	
ATTACH CHECK	5	TOTALS (Add lines 1 through 4)	99999999999999	9999999999		9999	999	99999999999999					5
CHC	6	RATES \$0.25			\$66			\$16					6
ATTA(7	TAXES (Multiply line 5 by line 6) 99999999999999999999999999999999999		999	00 999999999		9999999999999 00		99999999999	.99	7		
1	8.		TOTAL TAXES DUE. Add line 7, Columns A through F. Enter the result here. If you did not have any activity for the period, enter "0.00" here							99999999999	.99	8	
	9.	AMOUNTS ASSESSED DUF	AMOUNTS ASSESSED DURING THE YEAR			PENALTY INTEREST			9999 9999		99999999999	.99	9
	10	. TOTAL AMOUNT. Add lines	8 and 9								99999999999		10
	11.	. TOTAL TAXES PAID on Form	ns RV-2 (and the Annual retur	n if this									
		is an Amended return) less a	-	•		11		99999					
	12	Additional assessments paid . PENALTIES \$	for the tax year, if included or	1 line 8 99 p.		12		99999					
		. TOTAL PAYMENTS MADE F			13 14		<u> </u>						
		. CREDIT CLAIMED ON ORIGINAL			15		99999						
	16	. NET PAYMENTS MADE. Lin	e 14 minus line 15							99999999999.		16	
		. CREDIT TO BE REFUNDED										99	17
	18.	ADDITIONAL TAXES DUE. Line 10 minus line 16		PENALTY			<u></u>		 a a	999999999999.	99	18	
	19	. FOR LATE FILIN	NG ONLY 🔶		INTER			99999			99999999999.	99	19
	20	. TOTAL AMOUNT DUE AND	PAYABLE. (Add lines 18 and							· · · · ·	999999999999.		20
	21.	PLEASE ENTER THE AMOUNT OF YOUR PAYMENT. Attach a check or money order payable to "HAWAII STATE TAX COLLECTOR" to Form RV-3. Write "RV," the filing period, your Hawaii Tax I.D. No., and your daytime phone number on your check or money order. Mail to: HAWAII DEPARTMENT OF TAXATION, P.O. Box 1425, Honolulu, HI 96806-1425 If you are NOT submitting a payment with this return, enter "0.00" here.								99999999999.		21	
			der the penalties set forth in sect icle, and Car-Sharing Vehicle Surd						turn, prep	ared in	accordance with the provis	sions of	f the
			ARTNERSHIP, THIS RETURN MUST BE SIGN	0					ED AGENT.				
				ITLE					12-1	2	(123)999	_90	99
		SIGNATURE			11111		11111			<u> </u>			

ð	
Ö	
Σ	
Z	
NO	
R N	
¥	_
CHECK OF	
CH	L
₽	
`≺	_

Form RV-3 (rev. 2023) $\boldsymbol{98}$

ID NO XX



Name: HAWAII TAX I.D. No. **RV** 123-456-7890-01 M M D D Y Y Y Y

Last 4 digits of your FEIN or SSN

TAX YEAR ENDING 12-12-1212

		COLUMN D	COLUMN E		COLUMN F			
	COLUMNS D, E & F SCHEDULE SCHEDULE SCHEDULE SCHEDULE SCHEDULE SCHEDULE SCHEDULE SCHEDULE SCHEDULE SUrcharge Tax — Enter the Number of Rental Motor Vehicle Days for rentals After December 31, 2022 and Before January 1, 2024			Rental Motor Vehick Surcharge Tax — Enter Number of Rental Motor V Days for rentals After December 31, 20 and Before January 1, 2	r the ehicle 123	Rental Motor Vehicl Surcharge Tax — Ente Number of Rental Motor V Days for rentals After December 31, 2 and Before January 1,		
1	OAHU DISTRICT	99999999999999		99999999999	99	99999999999	1	
2	MAUI DISTRICT	9999999999	999	99999999999	99	99999999999	99	2
3	HAWAII DISTRICT	9999999999	999	99999999999	99	99999999999	3	
4	KAUAI DISTRICT	99999999999999		99999999999	99	99999999999	4	
5	TOTALS (Add lines 1 through 4 of each column)	99999999999999		99999999999	99	99999999999	5	
6	RATES	\$6		\$6.50		\$7		6
7	TAXES (Multiply line 5 by line 6 in each Column)	99999999999	00	99999999999.	99	99999999999	00	7
	If all of your rental days are Before Ja r D and E and ent	nuary 1, 2025*, add line 7, Co er result here and on page 1,	99999999999.	99			7D&E	
If all of your rental days are After December 31, 2023 and Before January 1, 2026 **, add line 7, Columns E and F and enter result here and on page 1, line 7.							99	7E&F

* If all of your rental days fall within Calendar Year 2024, complete ONLY Line 7 D&E.

** If all of your rental days fall within Calendar Year 2025, complete ONLY Line 7 E&F.

¹²³⁴