

STATE OF HAWAII — DEPARTMENT OF TAXATION  
**TRACER REQUEST FOR TAX YEAR \_\_\_\_\_**

(See back for Instructions)

Place  
QR Code  
Here

(NOTE: References to "married" and "spouse" are also references to "in a civil union" and "civil union partner," respectively.)

**Check One Tax Type for this tracer request:**

Human Readable text here

- |   |   |   |                                 |
|---|---|---|---------------------------------|
| <input type="checkbox"/> Net Income   | <input type="checkbox"/> Franchise                | <input type="checkbox"/> Public Service Company | <input type="checkbox"/> Estate |
| <input type="checkbox"/> General Excise/Use   | <input type="checkbox"/> Transient Accommodations | <input type="checkbox"/> Withholding            | <input type="checkbox"/> Liquor |
| <input type="checkbox"/> Rental Motor Vehicle, Tour Vehicle and Car-Sharing Vehicle |   | <input type="checkbox"/> Cigarette and Tobacco  | <input type="checkbox"/> Fuel   |

**Part I General Information** (Complete lines 1 through 5)

1. Taxpayer's Name(s): Primary Taxpayer _____  Spouse _____	2. Social Security No(s). or Federal Employer I.D. No.: Primary Taxpayer _____ Spouse _____ Hawaii Tax I.D. Number for the tax account indicated above _____
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3. Mailing Address on the Return _____	4. New Mailing Address (if different) _____
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5. Daytime Telephone Number: Residence (\_\_\_\_\_) \_\_\_\_\_ Business (\_\_\_\_\_) \_\_\_\_\_

**Part II Reason For Tracer Request**

**CAUTION:** A "STOP PAYMENT" will be issued on the original refund check upon receipt of this form. If you receive or find your original check after submitting this form, **DO NOT CASH THE ORIGINAL CHECK.** You must return the check to the Department of Taxation.

- Did you receive the refund check and if "No," how many days since you filed a return requesting a refund?  
 Yes     No, more than 45 days.     No, 45 days or less.  
 If "No," stop here, see instructions. Otherwise continue to line 2.
- The refund check was received but was (check ONE of the following boxes):  
 Lost     Stolen     Destroyed     Other \_\_\_\_\_  
**AND**  
 Was the check endorsed?     Yes, continue to line 3.     No, stop here.
- The refund check was endorsed, check which box applies to your endorsement:  
 All required signatures     Taxpayer's signature only     Spouse's signature only  
 Payee's signature     Officer, Partner, Member, Executor, Trustee, or Authorized Agent signature  
 For Deposit Only     Pay to the Order of \_\_\_\_\_

**Part III Direct Deposit Recall**

Was your ACH information correct on your return?

- Yes     No

If "No," enter the correct bank information:

Account No. \_\_\_\_\_

Routing No. \_\_\_\_\_

Amount of Refund \$ \_\_\_\_\_

**Part IV Declaration**

I hereby declare, under the penalties provided by sections 231-34, 231-35, and 231-36, HRS, that I have examined this request and, to the best of my knowledge and belief, it is true, correct, and complete.

Print or Type Your Name

Signature

Title (if applicable)

Date

## GENERAL INFORMATION

NOTE: Civil unions are recognized in Hawaii. Hawaii's laws that apply to a husband and wife, spouses, or person in a legal marital relationship shall be deemed to apply to partners in a civil union with the same force and effect as if they were "husband and wife," "spouses," or other terms that describe persons in a legal marital relationship.

Same sex marriages are recognized in Hawaii. Hawaii law recognizes marriages between individuals of the same sex and extends to such same-sex couples the same rights, benefits, protections, and responsibilities of marriage that opposite-sex couples receive.

## PURPOSE OF THIS FORM

Use Form L-80 to trace a refund check or to request a recall of a refund issued by direct deposit.

## INSTRUCTIONS

1. Enter the tax year for which the refund was due at the top of the Form L-80 **and** check the appropriate box to indicate the type of tax the tracer request is for. If you are requesting a tracer for more than one refund, you must complete a separate Form L-80 for each request.
2. If you are using Form L-80 to trace a refund check, complete Parts I, II and IV of the Form. A "**STOP PAYMENT**" will be issued on the original check after you send in Form L-80. If you receive or find your original check after submitting the Form, **DO NOT CASH THE ORIGINAL CHECK**. You must return the check to the Department of Taxation.

If you have not received your refund check and you have filed your return requesting a refund:

- 45 days or less, STOP HERE. You must wait more than 45 days to submit this form.
- more than 45 days, submit your completed Form L-80 (and ITPS-COA, if applicable) to the address provided below.

If you are using Form L-80 to request a recall of a direct deposit that was sent to the wrong account, complete Parts I, III and IV of the Form.

In the case of a corporation, partnership or trust, an officer, a partner, member, executor, trustee or duly authorized agent must sign Form L-80. **Be sure to complete Part IV, Declaration, print or type your name, include title (if applicable) and date in the spaces provided. You must include your signature.** Your request will not be processed if any requested information is missing.

If you provided a new mailing address on Form L-80, the Department of Taxation will update its records with the new mailing address that you provided. Any future correspondences will be mailed to the new mailing address that you provided. If you need to change your mailing address again in the future, please complete and submit Form ITPS-COA. Forms are available online at **[tax.hawaii.gov/forms](https://tax.hawaii.gov/forms)**.

3. Send the completed Form L-80 (and ITPS-COA, if applicable) to:  
Hawaii Department of Taxation  
Attention: Revenue Accounting  
P.O. Box 259  
Honolulu, HI 96809-0259

You should receive information about your refund in four to six weeks.

If you have any questions, please call the Department of Taxation at (808) 587-4242 or toll-free at 1-800-222-3229. For hearing impaired access, please call (808) 587-1418 or toll-free at 1-800-887-8974.