



ESTIMATED RAILROAD TAX

TAXPAYER'S WORKSHEET - KEEP FOR YOUR RECORDS

1	2024 Railroad Company Railroad Tax (see Notice of Value and Tax Bill, Line 5)	1	
2	2024 Overpayment applied to 2025 taxes	2	
3	Balance of Estimated Railroad Company Railroad Tax (Line 1 minus Line 2)	3	

COMPUTATION AND RECORD OF PAYMENTS

Date Paid	Amount of each Installment (1/4 of Line 1 of worksheet)	2024 Overpayment Applied to Installment	Balance Due	Calendar Year Due Dates
				April 15, 2025
				June 15, 2025
				September 15, 2025
				December 15, 2025

IMPORTANT:
THE PENALTY PROVISIONS OF RSA 21-J:32 WILL APPLY
IF THE ESTIMATE REQUIREMENTS HAVE NOT BEEN MET.

MAKE YOUR PAYMENTS ONLINE AT
GRANITE TAX CONNECT
gtc.revenue.nh.gov/TAP/_/



DUE APRIL 15, 2025

Name of Taxpayer

Taxpayer Identification Number

Number & Street Address

Address (continued)

City / Town

State

Zip Code + 4 (or Canadian Postal Code)

Enclose, but do not staple or tape
your payment to this estimate.
Do not file a \$0 estimate.

Amount of Payment

Make Check Payable to: STATE OF NEW HAMPSHIRE

**MAKE YOUR PAYMENTS ONLINE AT GRANITE
TAX CONNECT gtr.revenue.nh.gov/TAP/**

Or mail to:
NH DRA
PO BOX 637
CONCORD NH 03302-0637

Cut along this line to submit Estimated Railroad Tax. Keep the Estimated Tax Worksheet for your records.



DUE JUNE 15, 2025

Name of Taxpayer

Taxpayer Identification Number

Number & Street Address

Address (continued)

City / Town

State

Zip Code + 4 (or Canadian Postal Code)

Enclose, but do not staple or tape
your payment to this estimate.
Do not file a \$0 estimate.

Amount of Payment

Make Check Payable to: STATE OF NEW HAMPSHIRE

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CONCORD NH 03302-0637



DUE SEPTEMBER 15, 2025

Name of Taxpayer

Taxpayer Identification Number

Number & Street Address

Address (continued)

City / Town

State

Zip Code + 4 (or Canadian Postal Code)

Enclose, but do not staple or tape
your payment to this estimate.
Do not file a \$0 estimate.

Amount of Payment

Make Check Payable to: **STATE OF NEW HAMPSHIRE**

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CONCORD NH 03302-0637

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DUE DECEMBER 15, 2025

Name of Taxpayer

Taxpayer Identification Number

Number & Street Address

Address (continued)

City / Town

State

Zip Code + 4 (or Canadian Postal Code)

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Do not file a \$0 estimate.

Amount of Payment

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