FORM A-6 (REV. 2018)

STATE OF HAWAII — DEPARTMENT OF TAXATION TAX CLEARANCE APPLICATION

FOR OFFICE USE ONLY

BUSINESS START DATE IN HAWAII

IF APPLICABLE

Place
QR Code
Here

Form A-6 can be filed electronically OR for all state, city, or county government contracts, may be obtained through Hawaii Compliance Express. See Instructions.

(NOTE: References to "married" and "spouse" are also references to

Here	"in a civil union" and "civil union partr	ner," respectively.)	HAWAII RETURNS FILED
1. APPLICANT INFORMATION:	(PLEASE TYPE OR PRINT C	LEARLY)	IF APPLICABLE
Applicant's Name			20 20 20
A alaksa a a			
City/State/Postal/Zip Code			STATE APPROVAL STAMP
			(Not valid unless stamped)
2. TAX IDENTIFICATION NUMBER			
HAWAII TAX I.D. #			
	I)		
SOCIAL SECURITY # (SSN)			
3. APPLICANT IS A/AN: (Check	conly ONE box)	-	IRS APPROVAL STAMP
 □ CORPORATION □ INDIVIDUAL □ LIMITED LIABILITY COMPANY □ Single Member LLC disregarded □ Subsidiary Corporation; enter page 		s FEIN/SSN	
4. THE TAX CLEARANCE IS REQ	JIRED FOR: (MUST check at least	ONE box)	
\square CITY, COUNTY, OR STATE GO' \square REAL ESTATE LICENSE	/ERNMENT CONTRACT IN HAWAII * ☐ CONTRACTOR LICENSE	☐ LIQUOR LICENSE ☐ BULK SALES ¹	
☐ FINANCIAL CLOSING☐ HAWAII STATE RESIDENCY☐ SUBCONTRACT☐ OTHER	□ PROGRESS PAYMENT□ FEDERAL CONTRACT□ LOAN	☐ PERSONAL	CERTIFIED COPY STAMP
* IRS APPROVAL STAMP IS ONL 1 ATTACH FORM G-8A, REPORT (REQUIRED FOR PURPOSES INDIC OF BUILK SALE OR TRANSFER	ATED BY AN ASTERISK.	
5. NO. OF CERTIFIED COPIES RE			
or 231-15.7, HRS, to sign on behalf of the tax	ither the taxpayer whose name is shown on line 1, or payer. If the request applies to a joint return, at least of correct, and complete form, made in good faith pursuance.	one spouse must sign. I declare to the best	
		()	()
SIGNATURE	DATE	TELEPHONE	FAX
PRINT NAME	PRINT TITLE: Co	orporate Officer, General Partner or Member, Inc	dividual (Sole Proprietor), Trustee, Executor

POWER OF ATTORNEY. If submitted by someone other than a Corporate Officer, General Partner or Member, Individual (Sole Proprietor), Trustee, or Executor, a power of attorney (State of Hawaii, Department of Taxation, Form N-848) must be submitted with this application. If a Tax Clearance is required from the Internal Revenue Service, IRS Form 8821, or IRS Form 2848 is also required. Applications submitted without proper authorization will be sent to the address of record with the taxing authority. UNSIGNED APPLICATIONS WILL NOT BE PROCESSED.

PLEASE TYPE OR PRINT CLEARLY — THE FRONT PAGE OF THIS APPLICATION BECOMES THE CERTIFICATE UPON APPROVAL.

SEE PAGE 2 ON REVERSE & SEPARATE INSTRUCTIONS. Failure to provide required information on page 2 of this application or as required in the separate instructions to this application will result in a denial of the Tax Clearance request.

APPI	ICANT'S	NAME	FROM	PAGE 1

7.	CITY, COUNTY, OR STATE GO For completion/final payment o			0 0	•	letion/Final Pay		
	Name:			sy, and tolophone number of	•		, , ,	
8.	LIQUOR LICENSING:	☐ Initial	☐ Renewal	☐ Transfer-Seller		☐ Special E		
9.	CONTRACTOR LICENSING:	☐ Initial	☐ Renewal		•	·		
10.	STATE RESIDENCY:	DATE APPLIC	ANT ARRIVED OF	R RETURNED TO HAWAII				
11.	ACCOUNTING PERIOD:	☐ Calendar y	ear 🗆 Fisc	al year ending (MM/DD)				
12.	TAX EXEMPT ORGANIZATION	N:						
	A) Provide the Internal Revenu	e Code section	that applies to you	r exemption (e.g., 501(c)(3))).			
	B) Does your organization file	federal Form 99	0-T, Exempt Organ	ization Business Income Ta	ax Return?	\square NO		
	C) Is your organization required to file federal Form 990, Return of Organization Exempt From Income Tax, or							
	federal Form 990-EZ, Short	Form Return of	Organization Exer	npt From Income Tax?	☐ YES ☐ NO			
	If "YES," your organization is	s required to obt	ain a general excis	e tax license. Go to line 13				
	If "NO," go to line 12D.							
	D) Does your organization hav	e fundraising ind	come? YES	□ NO				
	If "YES," your organization is	s required to obt	ain a general excis	e tax license.				
13.	INDIVIDUAL: Spouse's Nam	ne			SSN			
14.	IF YOU <u>DO NOT</u> HAVE A GEN	ERAL EXCISE	TAX LICENSE AN	D REQUIRE A TAX CLEAR	RANCE:			
	A) Description of your firm's bu	ısiness						
	B) Has your firm had any busir	ness income in H	lawaii?			☐ YES	\square NO	
	C) Has your firm had an office,	inventory, prop	erty, employees, or	other representatives in th	e State of Hawaii?	☐ YES	\square NO	
	D) Has your firm provided any	services within	the State of Hawaii	(e.g., servicing computers	training sessions, etc.)?	☐ YES	\square NO	
	E) In the current or preceding	calendar year ha	as your firm had gro	oss income of \$100,000 or	more, or entered into			
	200 or more separate trans	actions attributa	ble to Hawaii in any	of the following, or combin	nation of the following,			
	activities? a) Tangible prope	erty delivered in	Hawaii; b) Services	s used or consumed in Haw	vaii; or c) Intangible propert	у		
	used in Hawaii.					☐ YES	\square NO	
	Note: If you answer "Yes" to an	v of the above o	uestions, vou are r	equired to apply for a gene	ral excise tax license.			

FILING THE APPLICATION FOR TAX CLEARANCE

The completed application may be mailed, faxed, or submitted in person to the Department of Taxation, Taxpayer Services Branch. Form A-6 may be used to get both a state tax clearance and a federal tax clearance. If you need to get a tax clearance from both agencies, you should submit a separate Form A-6 to each agency.

State Department of Taxation TAXPAYER SERVICES BRANCH P.O. BOX 259 HONOLULU, HI 96809-0259 TELEPHONE NO.: 808-587-4242 TOLL FREE: 1-800-222-3229 FAX NO.: 808-587-1488

830 PUNCHBOWL STREET, RM 124 HONOLULU, HI 96813-5094 Internal Revenue Service W&I FIELD ASSISTANCE 300 ALA MOANA BLVD., #1-128 HONOLULU, HI 96850

(By appointment only. To make an appointment, please call 844-546-5640.)

TELEPHONE NO.: 808-566-2748 FAX NO.: 855-877-0789

Applications are available at Department of Taxation and IRS offices in Hawaii, and may also be requested by calling the Department of Taxation on Oahu at 808-587-4242 or toll-free at 1-800-222-3229. The Tax Clearance Application, Form A-6, can be downloaded from the Department of Taxation's website at **tax.hawaii.gov**.