

BOARD OF REVIEW (BOR) APPEAL WITHDRAWAL NOTICE

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

Instructions: File this form with the Director of Taxation to withdraw your appeal to the Board of Review (BOR). If a joint appeal was filed, both spouses must sign this form. The withdrawal will not be honored if the BOR has issued a decision or other dispositive order.

Taxpayer's Name (include both spouses if a joint appeal was filed)

Spouse's Name (if a joint appeal was filed)

Address (Number, Street, P.O. Box) City, State, and Postal/Zip Code

Hawaii Tax Identification Number (if applicable):

I voluntarily withdraw my appeal of the following assessment(s):

Tax type: _____

For the period(s): _____

Issued by (check one) Office Audit Field Audit

to the State of Hawaii Board of Review for the taxation district of (check one):

- Oahu Maui Hawaii Kauai

By withdrawing my appeal, I understand I am giving up my right to appeal this matter with the BOR and that my appeal will be dismissed. I declare that I am the taxpayer or a representative duly authorized to execute and deliver this withdrawal on behalf of the above named taxpayer(s).

Signature Print or Type Your Name Title (if applicable) Date

Spouse' signature (if applicable) Print or Type Spouse Name Title (if applicable) Date

Please return this form to:
Director of Taxation
Department of Taxation
830 Punchbowl Street Room 221
Honolulu, HI 96813-5094

OFFICE USE ONLY

BOR case number: _____

The withdrawal is:
 Accepted and will conclude any further action on the appeal. Case closed on _____
 Denied, due to _____