

**STATE OF HAWAII
DEPARTMENT OF TAXATION**



**General Information
and Scannable Specifications
for
Form N-200V (Rev. 2014)**

Contact Information

Hawaii Department of Taxation
Technical Section
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**Hawaii Software Vendor Website
Address:**

tax.hawaii.gov/vendor/

FORM N-200V (Rev. 2014)

General Information and Scannable Specifications

This document provides software vendors with the requirements for reproducing Form N-200V. Form N-200V is designed for electronic scanning that permits faster processing with fewer errors. Software developers who reproduce, develop, or distribute Form N-200V must create the form so the variable data (specified fields containing

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 current Forms Reproduction Policy, and be approved prior to release or distribution.

GENERAL INFORMATION

1. Substitute Form

- Substitute scannable forms must be created according to Department specifications and be approved prior to release or distribution.
- 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.

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. Variable Data

- All variable data fields must utilize 12 pt Courier font, and all variable text data must be in uppercase letters. Text labels must not touch variable data.
- All variable data fields require exact placement.
- Use a bold X (**X**) as a checkbox indicator. See exhibit for exact placement. The use of a checkmark is not acceptable.

4. Variable Data Delimiters

- Taxpayer's Social Security Number and/or spouse's social security number should be printed with spaces between the dash (-) delimiters and allow the use of the letter "H" for taxpayers using a Hawaii temporary taxpayer ID number. For example:
123 - 45 - 6789 or H12 - 34 - 4567
(3 digits, followed by a space, followed by a dash (-), followed by a space, followed by 2 digits, followed by a space, followed by a dash (-), followed by a space, followed by 4 digits.

5. Dollar Amounts 123456789.12

- Do not use commas as thousand separators.
- Amounts are right justified.
- Dollar and cent signs should not be used.

6. Testing and Approval of the Scannable Form

- The printed 6x10 grid of the form on acetate overlays should be used to verify the exact data field placement. Although the form was revised for 2014, the placement of the variable data has not changed from revision 2009. The text "Check this box if this is a change of address" has been changed to "First time filer". To help minimize costs, please use the acetate overlays from revision 2009. If you do not have the overlays from revision 2009, please contact the Forms Coordinator. Verify your test data filled facsimile samples with the overlays prior to submitting them for testing. If the samples do not match the overlays within 1/16", do not submit them for approval as they will be rejected.
- 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 trailing spaces).
- 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 samples.
- Approval of the facsimile must be obtained from the Department **prior** to filing.

SCANNABLE SPECIFICATIONS

1. Layout

- The form was designed on a 6x10 grid. See exhibits.
- Open space around variable data fields should be adhered to as much as possible. 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:
Page 1, on row 63 at columns 19 and 20.
- See our Hawaii software vendor website for your Hawaii Vendor I.D. Number. If your company is not listed, please contact the Forms Coordinator.

3. Registration Marks

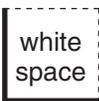
- Registration marks are required on the form. The scanning equipment looks for "Ls", or registration marks. Exact placement of the registration marks are required.
- The vertical and horizontal edges of the registration marks must be the same length of .5 inch long and .0278 inch thick.
- There are **two** registration marks on the form.
 1. The top right registration mark should extend from the beginning of column 76 to the end of column 80 and should rest at the top of row 52.



2. The bottom left registration mark should start at the beginning of column 6 and extend through the end of column 10 and rest on the top of row 64.



- The tolerance is 1mm (1/4 of a grid).
- No data or other stray marks are allowed to encroach within the white space in a .5 inch square of the registration mark.



4. Barcode

- A 1D barcode is specific to the form. The property of the 1D symbology barcode uses 3 of 9 (Code 39).
- Placement of the barcode is as follows:
Page 1, approximately at the top of row 48 and at the beginning of column 6.
- Height of the barcode is .5 inch.
- Length of the barcode is approximately 2 inches.
- Density of narrow bar width is set to 20 mils with resolution set to 300 dpi.
- Narrow to Wide Ratio is set to 2.
- Open space surrounding the barcode should be adhered to as much as possible.
- DO NOT stretch the barcode image.
- The required barcode is JHT141:



JHT141

The barcode includes the form number code (JH), type of form (T), form year (14), and page number (1). There are no hyphens.

- Use of the Department of Taxation's JPEG file of the barcode is preferable. The JPEG files can be found at our software vendor website.
- DO NOT use Windows Metafile Format (wmf). This format causes a very low read rate by the Department's IBML scanners.

5. Acetate overlays

- Although the form was revised for 2014, the placement of the variable data has not changed from revision 2009. The text "Check this box if this is a change of address" has been changed to "First time filer". To help minimize costs, please use the acetate overlays from revision 2009. If you do not have the overlays from revision 2009, please contact the Forms Coordinator.

INDIVIDUAL INCOME TAX PAYMENT VOUCHER

2014

(NOTE: References to "married", "unmarried", and "spouse" also means "in a civil union", "not in a civil union", and "civil union partner", respectively.)

GENERAL INSTRUCTIONS

INTERNET FILING — Form N-200V can be filed and payment made electronically through the State's Internet portal. For more information, go to tax.hawaii.gov/eservices/.

ABOUT THIS FORM

The Form N-200V has been redesigned for electronic scanning that permits faster processing with fewer errors. In order to avoid unnecessary delays caused by manual processing, taxpayers should follow the guidelines listed below:

- 1. Print amounts only on those lines that are applicable.
2. Use only a black or dark blue ink pen. Do not use red ink, pencil, or felt tip pens.
3. Because this form is read by a machine, please print your numbers inside the boxes like this:
4. Do NOT print outside the boxes.
5. Do NOT use dollar signs, commas, slashes, dashes or parenthesis in the boxes.
6. Photocopying of this form could cause delays in processing your payment.



PURPOSE OF FORM

If you have a balance due on your 2014 Form N-11, N-13, N-15, or N-310, use Form N-200V to send your payment to the Department of Taxation. Using Form N-200V allows us to process your payment more accurately and efficiently.

HOW TO COMPLETE FORM

Print your name, address, and social security number in the space provided. If you are filing a joint return, print your

spouse's name and social security number in the space provided.

If you have a foreign address, enter the complete country name in the space provided.

If you are an alien and were issued an individual taxpayer identification number (ITIN) by the IRS, enter your ITIN. If you applied for an ITIN but the IRS has not yet issued the ITIN, write "ITIN Applied For" in the space above the box where you enter your name.

Print the amount of your payment in the space provided.

Make your check or money order payable in U.S. dollars to "Hawaii State Tax Collector". Make sure your name and address appear on your check or money order. Please write your social security number, daytime phone number, and "2014" along with the form number of the tax return you are filing (e.g. "2014 Form N-11"). Do not postdate your check. Do not send cash.

WHERE TO FILE

Detach Form N-200V along the dotted line. Attach your payment and Form N-200V to the front of your return and send to:

Hawaii Department of Taxation
Attn: Payment Section
P. O. Box 1530
Honolulu, Hawaii 96806-1530

Note: If you filed electronically, but are not paying electronically, attach your check or money order to the front of Form N-200V and send them to the above mailing address.

Form (Rev. 2014) Tax Year N-200V 2014 STATE OF HAWAII -- DEPARTMENT OF TAXATION INDIVIDUAL INCOME TAX PAYMENT VOUCHER DETACH HERE DO NOT WRITE OR STAPLE IN THIS SPACE



JHT141

DO NOT SUBMIT A PHOTOCOPY OF THIS FORM

X First time filer

Form with fields for: Your first name, M.I., Last name, TAXPAYER'S 1ST NAME MI TP'S LAST NAMEXXXX, If joint return, spouse's first name, M.I., Last name, SPOUSE'S 1ST NAMEXX MI SPOUSE'S LAST NAME, Present mailing or home address (Number and street, including rural route), Apartment Number, TAXPAYER'S ADDRESS XXXXXXXXXXXXXXXX APT NO., City, town, or post office, State, Postal/ZIP Code, Country, For office use only, CITY OR TOWN HI 12345 COUNTRYXX

Your Social Security Number
123 - 12 - 1234
Spouse's Social Security Number
123 - 12 - 1234
Amount of Payment

MAIL THIS VOUCHER WITH CHECK OR MONEY ORDER PAYABLE TO "HAWAII STATE TAX COLLECTOR." Write your social security number, daytime phone number, "2014", and form number of the tax return you are filing (e.g. "2014 Form N-11") on your check or money order.

ID NO 12

123456789.12

STATE OF HAWAII — DEPARTMENT OF TAXATION
INDIVIDUAL INCOME TAX PAYMENT VOUCHER

2014

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1. Print amounts only on those lines that are applicable.
2. Use only a black or dark blue ink pen. Do not use red ink, pencil, or felt tip pens.
3. Because this form is read by a machine, please print your numbers inside the boxes like this:

1 2 3 4 5 6 7 8 . 9 0

4. Do NOT print outside the boxes.
5. Do NOT use dollar signs, commas, slashes, dashes or parenthesis in the boxes.
6. Photocopying of this form could cause delays in processing your payment.

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spouse's name and social security number in the space provided.

If you have a foreign address, enter the complete country name in the space provided.

If you are an alien and were issued an individual taxpayer identification number (ITIN) by the IRS, enter your ITIN. If you applied for an ITIN but the IRS has not yet issued the ITIN, write "ITIN Applied For" in the space above the box where you enter your name.

Print the amount of your payment in the space provided.

Make your check or money order payable in U.S. dollars to "**Hawaii State Tax Collector**". Make sure your name and address appear on your check or money order. Please write your social security number, daytime phone number, and "2014" along with the form number of the tax return you are filing (e.g. "2014 Form N-11"). Do not postdate your check. Do not send cash.

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✂ — — — — — DETACH HERE — — — — — ✂
Form (Rev. 2014) Tax Year **STATE OF HAWAII — DEPARTMENT OF TAXATION** DO NOT WRITE OR STAPLE IN THIS SPACE
N-200V 2014 **INDIVIDUAL INCOME TAX PAYMENT VOUCHER**



JHT141

DO NOT SUBMIT A PHOTOCOPY OF THIS FORM

First time filer

Your first name		M.I.	Last name	
TAXPAYER'S 1ST NAME		MI	TP'S LAST NAMEXXXX	
If joint return, spouse's first name		M.I.	Last name	
SPOUSE'S 1ST NAMEXX		MI	SPOUSE'S LAST NAME	
Present mailing or home address (Number and street, including rural route)				Apartment Number
TAXPAYER'S ADDRESS XXXXXXXXXXXXXXXXX				APT NO.
City, town, or post office	State	Postal/ZIP Code	Country	For office use only
CITY OR TOWN	HI	12345	COUNTRYX	

Your Social Security Number
123 - 12 - 1234
Spouse's Social Security Number
123 - 12 - 1234
Amount of Payment
123456789.12

ID NO 12

MAIL THIS VOUCHER WITH CHECK OR MONEY ORDER PAYABLE TO "HAWAII STATE TAX COLLECTOR." Write your social security number, daytime phone number, "2014", and form number of the tax return you are filing (e.g. "2014 Form N-11") on your check or money order.