

STATE OF HAWAII — DEPARTMENT OF TAXATION
REPORTING AGENT AUTHORIZATION FOR INTERNET FILING

PART I TAXPAYER INFORMATION

Taxpayer's Name	Hawaii Tax Identification Number W _____ - ____
DBA Name	FEIN/SSN
C/O	Contact Name
Mailing Address (Number and Street)	Contact Daytime Telephone Number (Include Area Code)
City, State, and Postal/ZIP Code	Contact Fax Number (Include Area Code)
	Contact E-mail Address

PART II REPORTING AGENT INFORMATION

Reporting Agent's Name	Hawaii Tax I.D. Number W _____ - ____
Reporting Agent's Mailing Address (Number and Street)	Daytime Telephone Number (Include Area Code)
City, State, and Postal/Zip Code	

PART III TAX FORM (S) TO FILE VIA INTERNET

The above named Reporting Agent and its employees are authorized to sign and file the below indicated tax forms via the Internet and to make payments in connection with the below indicated tax forms:

- HW-14, Withholding Periodic Tax Return for the period beginning _____
- G-45, General Excise Periodic Tax Return for the period beginning _____
- G-49, General Excise Annual Return and Reconciliation for the period beginning _____
- TA-1, Transient Accommodations Periodic Tax Return..... for the period beginning _____
- TA-2, Transient Accommodations Annual Return and Reconciliation for the period beginning _____
- VP-1, Tax Payment Voucher..... for the period beginning _____

PART IV AUTHORIZATION AGREEMENT

Please read the following Authorization Agreement:

The above named taxpayer and/or employer understands the following responsibilities:

- **The above named taxpayer and/or employer is responsible for the actions of the above named Reporting Agent and its employees in connection with (a) the above indicated tax forms filed via the Internet and (b) the related payment made;**
- **All tax returns must be timely filed and all taxes must be timely paid; and**
- **All filed tax returns are true, correct, and complete by the above named taxpayer and/or employer.**

The failure of the above named Reporting Agent and its employees to comply with tax laws shall not absolve the above named taxpayer and/or employer of its responsibilities to comply with tax laws. The above named Reporting Agent and its employees are authorized to sign and file the above indicated tax returns via the Internet and to make payments in connection with the above indicated tax returns for the above named taxpayer and/or employer. This authorization applies to the above indicated tax returns and related payments beginning with the indicated tax period and remains in effect until the above named taxpayer and/or employer notifies the above named Reporting Agent. I authorize the State of Hawaii, Department of Taxation, to disclose otherwise confidential tax information to the above named Reporting Agent and its employees in connection with the transmission of the above indicated tax returns and related payments. I hereby certify under the penalties of perjury that I have the authority to authorize, on behalf of the above named taxpayer and/or employer, the above named Reporting Agent and its employees (a) to sign and file the above indicated tax returns via the Internet, (b) to make payments in connection with the above indicated tax returns, and (c) to receive confidential information in connection with the transmission of the above indicated tax returns and related payments.

Signature	Date
Print Name	Title

GENERAL INSTRUCTIONS

PURPOSE OF THIS FORM

Form EF-3 is used to authorize the designated Reporting Agent and its employees to sign and file the below listed tax return, tax payment form, and to make tax payments in connection with the tax returns via the Department of Taxation's Internet Bulk Filing System. The benefits of the Department of Taxation's Internet Bulk Filing System include the timely and efficient enmasse filing of the below listed tax forms:

- Form HW-14, Withholding Periodic Tax Return
- Form G-45, General Excise Periodic Tax Return
- Form G-49, General Excise Annual Return and Reconciliation
- Form TA-1, Transient Accommodations Periodic Tax Return
- Form TA-2, Transient Accommodations Annual Return and Reconciliation
- VP-1, Tax Payment Voucher

WHERE TO FILE THIS FORM

Provide the designated Reporting Agent a completed and signed Form EF-3 to authorize the Reporting Agent and its employees to sign and file tax returns, tax payment form, and to make tax payments in connection with the tax returns via the Department of Taxation's Internet Bulk Filing System. The designated Reporting Agent and its employees will keep the completed and signed Form EF-3 on file for examination by the Department of Taxation.

WHERE TO OBTAIN INFORMATION REGARDING INTERNET BULK FILING

The designated Reporting Agent and its employees will be responsible for notifying its applicable clients (the taxpayer or employer) of the Reporting Agent's eligibility to participate in the Department of Taxation's Internet Bulk Filing System.

For general information about the Bulk Filing program contact:

State of Hawaii Department of Taxation
Oahu District Office
Taxpayer Services Branch
P. O. Box 259
Honolulu, HI 96809-0259

E-mail address: Taxpayer.Services@hawaii.gov
Telephone: (808) 587-4242
Fax: (808) 587-1488
Toll Free: 1-800-222-3229 (From Neighbor Islands or Continental U.S.)

For information relating to Bulk Filing testing and test file certification contact:

Electronic Processing Testing Group
E-mail address: tax.efile.test.bulk@hawaii.gov
Telephone: (808) 587-9197

SPECIFIC INSTRUCTIONS

PART I, TAXPAYER INFORMATION. Enter the taxpayer's information (as applicable). For example, a taxpayer authorizing the designated Reporting Agent and its employees to sign and file Forms HW-14, G-45, G-49, TA-1, and TA-2 via the Internet would enter the taxpayer's name, Hawaii Tax I.D. number, mailing address, and contact information. As another example, an employer authorizing the designated Reporting Agent and its employees to sign and file only Form HW-14 via the Internet would enter the employer's name, Hawaii Tax I.D. number, mailing address, and contact information.

PART II, REPORTING AGENT INFORMATION. Enter the designated Reporting Agent's name, Hawaii Tax I.D. number, mailing address, and daytime telephone number including area code.

PART III, TAX FORM (S) TO FILE VIA INTERNET. Check all applicable boxes to indicate which tax returns the designated Reporting Agent and its employees are authorized (a) to sign and file via the Internet and (b) to make related payments. Enter the periods the designated Reporting Agent and its employees are authorized to begin signing and filing the indicated tax returns and to begin making related payments.

PART IV, AUTHORIZATION AGREEMENT. Carefully read the authorization agreement and sign, date, and print name and title.