FORM GEW-TA-RV-1 (REV. 2009)

STATE OF HAWAII DEPARTMENT OF TAXATION

| NOTIFICATION OF CANCELLATION OF TAX LICENSES AND TAX PERMITS |
|--|
| Name |
| Doing Business As (DBA) Name |
| () Telephone Number |

DO NOT WRITE IN THIS AREA

CANCEL MY TAX LICENSE(S) AS INDICATED BELOW:

| License Type | Hawaii Tax I.D. No. | Effective Date (MM/DD/YYYY) |
|--------------|---------------------|-----------------------------|
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| | W | / |
| | W | / |
| | W | // |
| | W | // |
| | W | / |
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| | W | // |

CANCEL MY TAX PERMIT(S) AS INDICATED BELOW:

| | . , | | |
|-------------|---------------|---------------------|-----------------------------|
| Permit Type | Permit Number | Hawaii Tax I.D. No. | Effective Date (MM/DD/YYYY) |
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Instructions to Cancel Tax License(s): (1) Enter the type(s) of license(s) you are cancelling (e.g., general excise (GE), transient accommodations (TA), rental motor vehicle & tour vehicle (RVST), use tax only (Use), employer's withholding (WH), or seller's collection (SC)) in the License Type column. (2) Enter the Hawaii Tax I.D. number(s) for the license(s) that you are cancelling in the Hawaii Tax I.D. No. Column. (3) Enter the effective date (Month, Day, Year) of cancellation for the tax license(s) that you are cancelling in the Effective Date column.*

Instructions to Cancel Tax Permit(s): (1) Enter the type(s) of permit(s) you are cancelling (e.g. liquor, liquid fuel distributor, liquid fuel retail dealer, cigarette & tobacco (non-retail), or retail tobacco) in the Permit Type column. (2) Enter the permit number(s) for the permit(s) that you are cancelling in the Permit Number column. (3) Enter the effective date (Month, Day, Year) of cancellation for the permit(s) that you are cancelling in the Effective Date column.*

*The effective date should correspond to the last day of the last filing period required to be filed (even if the tax due is 'zero'). (Example: If the last filing period required to be filed is the 4th Quarter of 2010, the effective date of cancellation should be 12/31/2010, and not 1/1/2011.)

Signature, Filing, & Payment Requirements: This form must be signed and sent to the Department of Taxation with the tax license(s)/permit(s) that you are cancelling. **An unsigned cancellation notice will not be accepted.** All required periodic (monthly, quarterly, or semiannual) and annual tax returns must be filed up to the date of cancellation and all taxes due paid in full. If the required returns and

taxes due are not filed and paid in full, the tax license(s)/permit(s) will be cancelled as requested, but your tax account(s) will remain open for actions by the Department of Taxation to the extent permitted by law.

Mailing Address:

Hawaii Department of Taxation Licensing Section P. O. Box 1425 Honolulu, HI 96806-1425

| Signature of Owner, Partner or Member, Officer, or Duly Authorized Agent |
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| |
| Print Name of Signatory |
| |

Title Date