

NEW HAMPSHIRE DEPARTMENT OF REVENUE ADMINISTRATION
**APPLICATION FOR 31 DAY EXTENSION OF TIME TO FILE
ELECTRICITY CONSUMPTION TAX RETURN**

FOR DRA USE ONLY

IMPORTANT: AN EXTENSION OF TIME TO FILE YOUR NEW HAMPSHIRE ELECTRICITY CONSUMPTION TAX RETURN IS SUBJECT TO APPROVAL PURSUANT TO RSA 83-E:5,V.

WHEN TO USE THIS FORM

If your extension is approved, you may file your New Hampshire Electricity Consumptions Tax return up to 31 days beyond the original due date and you will not be subject to the late filing penalty. Please note that an extension of time to file your return is not an extension of time to pay the tax.

If the information required for the making of an accurate return cannot reasonably be compiled by a provider or consumer within 45 days after the close of the calendar month for which the return is to be made, the provider or consumer may request an extension of time for filing the return for a period not to exceed 31 calendar days.

If you need to make an additional payment in order to have paid 100% of the tax determined to be due, then you must submit this form with payment by the original due date in order to be granted an extension of time to file your return.

WHEN TO FILE

This application and payment must be postmarked on or before the original due date of the return.

REASONS FOR DENIAL

Applications for extension will be rejected for reasons such as, but not limited to, failure to complete the tax payment schedule, absence of the provider or consumer or authorized agent's signature, the application was postmarked **after** the due date for filing the return, or the payment for the balance due shown on line 3 below did not accompany this application.

WHERE TO FILE

NH DRA - Audit Division
109 Pleasant St
PO Box 1388
Concord NH 03302-1388

NEED HELP?

Call the New Hampshire Department of Revenue Administration, Audit Division, at (603) 230-5030. Hearing or speech impaired individuals may call TDD Access: Relay NH 1-800-735-2964.

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PRINT OR TYPE

NAME OF PROVIDER OR CONSUMER	FEDERAL EMPLOYER IDENTIFICATION NUMBER
NUMBER & STREET ADDRESS	SOCIAL SECURITY NUMBER
ADDRESS (continued)	
CITY/TOWN, STATE & ZIP CODE+4	

For the Month of _____ or Year Ending _____
Mo Year Year

TAX PAYMENT SCHEDULE

1 Enter 100% of the Electricity Consumption Tax determined to be due.....	1		
2 LESS: Credits.....	2		
3 BALANCE DUE: Make check payable to: State of New Hampshire	3		

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Your application for a 31 day extension has been:

Approved Denied

Signature _____ Date _____

A copy of this approved application must be attached to the Electricity Consumption Tax Return.

MAIL TO: NH DRA
AUDIT DIVISION
PO BOX 1388
CONCORD, NH 03302-1388

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