

WEST VIRGINIA  
**REQUEST FOR WAIVER OF PENALTY**

FEIN		WV TAX ACCOUNT ID		TAX PERIOD ENDING MM/DD/YYYY	
COMPANY NAME					
FIRST LINE OF ADDRESS				SECOND LINE OF ADDRESS	
CITY				STATE	ZIP

**WAIVER INFORMATION**

I AM REQUESTING A WAIVER OF PENALTY ON THE TAX ACCOUNT AND PERIOD LISTED ABOVE IN THE AMOUNT OF

\$

FOR THE FOLLOWING REASON(S):

- ☐ REPORT ON ACTUAL PRODUCTION FIGURES
- ☐ UNAWARE OF THE MANDATORY EFT REQUIREMENT
- ☐ OTHER (MUST PROVIDE REASON)

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**SIGNATURE**

This form is not considered complete unless it is signed.

*Under penalty of perjury, I declare that I have examined this return, accompanying schedules, and statements, and to the best of my knowledge and belief, it is true, correct and complete.*

SIGNATURE OF TAXPAYER	TITLE	DATE
NAME OF TAXPAYER - TYPE OR PRINT	E-MAIL	PHONE
SIGNATURE OF CPA/ATTORNEY	TITLE	DATE
NAME OF CPA/ATTORNEY - TYPE OR PRINT	E-MAIL	PHONE
SIGNATURE OF CPA/ATTORNEY	TITLE	DATE
NAME OF CPA/ATTORNEY - TYPE OR PRINT	E-MAIL	PHONE

**MAIL TO WEST VIRGINIA TAX DIVISION  
ATTN. EXCISE AND SUPPORT UNIT  
P.O. BOX 2991  
CHARLESTON, WV 25330-2991**

FOR ASSISTANCE CALL (304) 558-3333 TOLL FREE (800) 982-8297  
For more information visit our web site at: [www.tax.wv.gov](http://www.tax.wv.gov)  
File online at <https://mytaxes.wvtax.gov>



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