

MARYLAND
Electronic Funds Transfer
ACH DEBIT OPTION OF PUBLIC SERVICE COMPANY FRANCHISE TAX

IMPORTANT: TO BE CONSIDERED TIMELY, YOUR CALL MUST BE COMPLETED BY 2:00 P.M. (EST/EDT) ON THE LAST BANKING DAY PRIOR TO THE DUE DATE. Operators are available 24 hours per day 365 days per year to take your payment information. We encourage you to call in advance of the final day to avoid last minute delays. Your account will not be debited until the date you designate as the debit date.

Before calling to report your tax payment, be sure to have the following information readily available:

***MARYLAND DEPARTMENT IDENTIFICATION NUMBER**

“MD” followed by the 9 nine digit Department identification number assigned by the Department of Assessments and Taxation

***PASSWORD**

A temporary password of 0000 has been assigned. You must change this code at the time you report your first tax payment. The new code must consist of four numeric characters.

***TAX TYPE CODE**

The tax Type Code for a Public Service Company Franchise payment is “04600”

***TAX PERIOD ENDING DATE**

MMDDYY Format.
(E.g., December 31, 2020 would be 123120)

***TAX PAYMENT**

Amount of Public Service Company franchise taxes being paid.

***DEBIT DATE**

The exact date you wish your account to be debited in MMDDYY format.

***VERIFICATION CODE**

This 2-digit code is a calculation you must report to ensure the Tax Payment amount is communicated correctly. The calculation will also be computed by the system. The verification code you report must match the system-generated code for the transaction to continue.

Example: Assume a total payment of \$20,215.17

- A. Total all digits:
 $2+0+2+1+5+1+7=18$
- B. Count the number of digits:
 $2,0,2,1,5,1,7=7$
- C. Add A and B: $(18+7=$ verification code of 25)

NOTE: The verification code for \$0.00 is 01

When you have the above information.....**CALL 1-800-228-1177 OR 1-800-234-5653.**

VOICE ENTRY INSTRUCTIONS

1. Operator: "This is operator # _____. May I help you?"
Caller: "I have a tax payment to report. My Maryland Department identification number is MD _____."
 2. Operator: "Welcome to Maryland's Electronic Funds Transfer Program. May I have your **PASSWORD** please?"
Caller: "MY PASSWORD IS _____."
 3. Operator: "What is your **TAX TYPE CODE**?"
Caller: "MY TAX TYPE CODE IS 04600."
 4. Operator: "Is this a **PAYMENT, CANCELLATION or INQUIRY**?"
Caller: "Payment."
 5. Operator: "What is your **Tax Period Ending Date**?"
Caller: "MY TAX PERIOD ENDING DATE IS _____.(MMDDYY)"
 6. Operator: "What is the date your bank account is to be debited?"
Caller: "MY ACCOUNT IS TO BE DEBITED ON ____."(MMDDYY)
 7. Operator: "What is your **TAX PAYMENT** amount?"
Caller: "MY TAX PAYMENT AMOUNT IS ___ dollars and cents."
 8. Operator: "What is your **VERIFICATION CODE**?"
Caller: MY VERIFICATION CODE IS _____." (2-DIGITS)
 9. Operator: "Your **REFERENCE NUMBER** IS _____."
- NOTE:** Please record this number for your records. It is proof of the call and is required if you need to cancel the payment information up until the day prior to the debit date.
10. Operator: "Do you have another Maryland tax transaction?"
Caller: "Yes" or "No".

NOTE: If **NO**, the call is ended. If **YES**, you have the option of performing another function (payment, cancellation or inquiry) on the same I.D. or any other Tax I.D. Please follow the VOICE ENTRY INSTRUCTIONS for that particular tax type.

MARYLAND
Electronic Funds Transfer
INQUIRIES/CANCELLATIONS FOR ACH DEBIT OPTION OF
PUBLIC SERVICE COMPANY FRANCHISE TAX

NOTE: ONLY PAYMENT TRANSACTIONS THAT HAVE NOT BEEN TRANSMITTED WILL BE AVAILABLE FOR INQUIRY AND/OR CANCELLATION.

AN INQUIRY AND/OR CANCELLATION CAN BE MADE IN THE SAME PHONE CALL AS A TAX PAYMENT OR AS A SEPARATE CALL.

Before calling, please have the following information readily available:

***MARYLAND DEPARTMENT IDENTIFICATION NUMBER:**

“MD” followed by the 9 nine digit Department identification number assigned by the Department of Assessments and Taxation

***PASSWORD**

Your 4 digit password.

***REFERENCE NUMBER:**

If performing a cancellation, the five-digit reference number corresponding to the transaction in question is required. (If unavailable, request an inquiry to obtain the particular reference number.)

***PAYMENT AMOUNT/INFORMATION:**

Payment amount and all information reported for the payment transaction.

INQUIRIES

CALL 1-800-234-5653 or 1-800-228-1177

1. Operator: “This is operator# _____. May I help you?”
Caller: **“I would like to perform an inquiry on a tax report.
My MARYLAND Department identification number is MD.”**
2. Operator: “Welcome to Maryland’s Electronic Funds Transfer Program.
May I have your PASSWORD please?”
Caller: **“MY PASSWORD IS _____.”**
3. Operator: “What is your **TAX TYPE CODE?**”
Caller: **“04600”**
4. The operator may reconfirm the desired function by asking, “Is this a **PAYMENT, CANCELLATION, or INQUIRY?**”
Caller: **“INQUIRY.”**
5. The operator will read the recorded payment that has not been transmitted. If multiple payments were captured, the operator will read the most recent information, then respond with, “Do you wish to see the previous payment?”
6. Caller: “Yes.” (When you wish to continue your inquiry.)
“No.” (When you wish to end the call)

CANCELLATIONS

NOTE: Any type of change requires a complete cancellation of the transaction in question and a re-entry of the corrected information. A cancellation and re-entry must be completed by 2:00 P.M. EST/EDT on the last banking day prior to the debit date specified. If the debit date falls on a weekend or legal holiday, your call must be completed by 2:00 P.M. EST/EDT on the last day prior to the weekend or holiday.

CALL 1-800-228-1177 or 1-800-234-5653

VOICE ENTRY INSTRUCTIONS

1. **Operator:** “This is operator # _____. May I help you?”
 Caller: **“I would like to cancel a tax report.
 My identification number is MD_____.”**

2. **Operator:** “Welcome to Maryland’s Electronic Funds Transfer Program.
 May I have your **PASSWORD** please?”
 Caller: **“MY PASSWORD IS _____.”**

3. **Operator:** “What is your **TAX TYPE CODE**?”
 Caller: **“04600”.**

4. The operator may reconfirm the desired function by asking, “Is this a **PAYMENT, CANCELLATION, or INQUIRY**?”
 Caller: **“CANCELLATION.”**

5. **Operator:** “What is the **REFERENCE NUMBER** of the tax report you wish
 to cancel?”
 Caller: **“MY REFERENCE NUMBER IS _____.”**

6. **Operator:** “Are you sure you want to **CANCEL** this transaction?”
 Caller: **“Yes” or “No.”**

NOTE: The operator will repeat the information to be canceled upon request.

7. **Operator:** “Do you have **ANOTHER** Maryland tax transaction?”
 Caller: **“Yes” or “No.”**

NOTE: If **YES**, you have the option of performing another transaction for the same ID and TAX TYPE, or an entirely different ID. If you wish to perform a transaction on another ID, please use the VOICE ENTRY INSTRUCTIONS for that tax type. If **NO**, the call is ended.

REMINDER: Upon cancellation of a payment, the corrected information must be re-entered.