

VAT: APPLICATION FOR REGISTRATION

	Please read the r						۸.							Use O			
Use block letter. Return the completed form to your nearest BURS Office or forward it directly to the Headquarters						V	AT NL	JMBER	<u>. </u>								
	BURS Offic	e or forward	it directly	to the H	eadquar	ters											
	TURE OF PERSON (tick	one)				ala Daaaa		7									
	Company Partnership					ole Propri ther (spec		+	1	1 1				_		\neg	
	ndividual				Ot	iller (spec	511 y)									_	
									-			-	-	-	-	_	
																	,
PAF	RTCULARS OF APPLICA	INT															
2.	Registered Name							Т]
2.	registered realite															\equiv	- 7
3.	Trade Name					-					LL						_
4.	Postal Address]
5.	Physical Address]
6.	Telephone Number]
7.	Fax Number]
8.	Cell Phone Number]
9.	E-mail Address]
10.	Income Tax Payer Iden	tification Num	ber														
11.	Company Registration	Number															
12.	Indicate whether you ar	e (tick all app	licable):		Impo	orter				Ехро	rter [Age	nt]
13.	State number of branch	nes covered b	y this applic	cation, if a	any												
14.	Basic Standard Industr	ial Classificat	ion Code (it	f known)													
15.	Main Taxable Activity																ן ו
16.	Commencement Date of	Business]
17.	Date on which busines	ss became/wi	II become li	able to be	e register	red											
18.	Number of Directors/P	artners/Meml	oers/Individ	uals													
BIIS	SINESS INFORMATION																
19.	As On Date								1								
20.	Value of supplies made Standard Taxable supp	e/expected to lies p	be made a	nnually (i	n Pula)				1								
21.	Zero-Rated Supplies	р]]								
		r							,								
22 E	Exempt Supplies	p							J								

PARTICULARS OF OFFICIALS Furnish particulars of two major Directors/Partners/Members/Individuals in spaces below:	
23. Official 1 Type Director Partner	Member Individual Individual
24. Surname	
25. First Names	
26. Nationality	
27. ID/Passport Number	
28. Residential Address	
29. Telephone Number 30. Fax num	nber L L L L L L L L L L L L L L L L L L L
31. E-mail Address	
23. Official 1 Type Director Partner	Member Individual Individual
24. Surname	
25. First Names	
26. Nationality	
27. ID/Passport Number	
28. Residential Address 29.	
29. Telephone Number 30. Fax nur	mher
31. E-mail Address	
31. E-Iliali Addicas	
PARTICULARS OF REPRESENTATIVE/PUBLIC OFFICER	
32. Surname	
33. First Names	
34. Capital	
35. Residential Address	
36. Telephone Number (Work)	
37. Telephone Number (Home)	
38. Fax Number	
39. Cell Phone Number	
40. E-mail Address	
41. Nationality	
42. Passport Number	
43. National Identity Number (Omang)	
44. Residence Permit Number	

PURCHASED BUSINESS
If an existing business was taken over or purchased, state the following
45. Date of take over/purchase
46. Previous VAT Registration Number
47. Trading Name
48. Previous Owner
49. Value of stock and assets transferred (excluding VAT)
Value of annual taxable supplies made/expected to be made
50. Year Ending
51. Amount
DETAILS OF BANK ACCOUNT
52. Name of Bank
53. Branch Name
54. Bank Account Number
55. Type of Account
56. Name of Account holder
Confirmation by Bank (to be completed by the bank):
57. Signature BANK STAMP
58. Name
59. Designation
VAT DEFERMENT ACCOUNT This part is to be completed only by importers who wish to apply for a VAT deferment account
60. I hereby apply for a VAT deferment account (Tick if applicable)
61. Estimated/expected annual value of imports P
62. Provide sales tax account number if you are currently registered for sales tax deferment ST NO.
Applicants without a sales tax deferment account are required to provide security.
DECLARATION OF TRUTH
I hereby declare that the particulars given herein are correct and hereby apply for registration for Value Added Tax and/or VAT Deferment Account
Signature
Capacity
Сараслу
Date
Warning: It is a serous offence to provide false information in this application. It is also a serious offence not to apply for registration as per the VAT Act.

FOR OFFICIAL USE ONLY

Attachments Required

Copy of certificate of Incorporation Copy of Omang / Passport for Two Major Directors Copy of Form 2

Submitted / Not Submitted / Not Required

Submitted / Not Submitted Submitted / Not Submitted

Business Representative

Submitted / Not Submitted

	Recommendation (REGIONAL OFFICE)	
VAT Registration / Deferment Account	Recommended / Not Recommended	
Reasons for refusal		
Signature		
Officer Name		STAMP
Date		
Date		
	Approval (Head Office)	
VAT Registration / Deferment Account Reason for refusal	Approved / Not Approved	
Signature		
Officer Name		STAMP
Date		

	NOTES FOR APPLICATION FOR REGISTRATION
Item No.	<u>NOTES</u>
1.	Place a tick in the appropriate box depending on the nature of your business. Under other,
	specify the nature of business e.g. trust, welfare organization, central/local authority, club etc.
2.	Insert the name of the legal entity as it appears on legal documents (such as the certificate of
	incorporation).
3.	Insert the trade name if it is different from the registered name.
5.	Insert the name of the location, street and plot number.
10.	Insert the taxpayer identification number (from your income tax certificate.
13.	If your business has branches please give the number of branches. In a case where you apply
	to register branches separately please write a letter explaining the reasons why you need to
	register branches separately and attach it to the application form.
14.	Insert the basic standard industrial classification code.
15.	State the main taxable activity e.g. supermarket, furniture manufacturers, law firm, bottle store,
	tour operator, wholesaler, garage, auctioneer, etc.
16.	State the date on which business started operating.
17.	Insert the date on which the annual taxable supplies exceeded P250 000 or are expected to
	exceed P250 000. Auctioneers and government authorities need to register at the date they
	commence on taxable activities.
18.	Insert number of Directors for companies, partners for partnership, committee members for clubs etc.
20-22	Insert the value of taxable supplies and exempt supplies made or expected to be made
	annually.
23-31	Furnish particulars for directors for companies, partners for partnership etc. Citizens must
	provide copies of their ID (Omang), Non citizens must provide copies of their passports.
32-44	A business representative must be the public officer of the company or somebody who is
	responsible for accounting for the receipt and payment of moneys or funds on behalf of the
	company.
52-59	The form must be presented to your bank for confirmation of your bank account. Please ensure
	the bank stamp is enclosed. If you have more than one bank account, please list all of them in
	a separate sheet. If the bank account is not that of the business, permission by holder must be
	furnished.
60-62	A guarantee in form of bond is required. This must be 20% of the monthly/expected importation
	of taxable items or a minimum of P20 000 whichever is greater.

......

FOR OFFICIAL USE ONLY

STAMP
_