



REGISTRATION OF EMPLOYMENT TAXATION SCHEME

Revenue Collection Division

Section A:

Employer TIN:

Employer Name :

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Postal Address :

Section B: EMPLOYER DETAILS

1 Authorized Officer/
Precedent Partner :

2 Trade or Business
Name :

3 Location of Business :

4 In case of
Company,
Registered Office :

5 Nature of business :

6 Number of
Employees registered
for scheme :

7 Year of claim for
scheme:

** A list of employee details registered for the scheme is to be attached with the application*

Section C: DECLARATION

I hereby certify that the information given on this form is true and correct and complete in every respect.

Signature of Applicant:

Date:

Capacity*:

** To be signed by either the Owner in case of sole trader businesses, Authorised Officer for companies or Precedent Partner for partnerships*

IT IS A SERIOUS OFFENCE TO GIVE FALSE INFORMATION TO THE COMMISSIONER

OFFICE USE ONLY

Approved by:

Date Approved: