

APPLICATION FORM FOR TAXPAYER REGISTRATION

(For Individuals)

All fields marked with * are Mandatory

Please fill up the form using **BLOCK LETTERS**

National Identity Card Number (NIC) * :

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Salutation *

: Rev. Prof. Dr. Mr. Ms.

Name with Initials (English)* :

Full Name of Applicant (English) * :

Date of Birth *:

D	D	/	M	M	/	Y	Y	Y	Y
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Country of Birth* :

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Gender * : Male Female

Nationality * :

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Preferred Language *

: Sinhala Tamil English

Source of Income* : Business Employment Investment Others

If others, please specify :

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Profession * :

Resident status* : Resident Non -Resident

Citizenship* : Citizen Non-Citizen

Dual Citizenship* : Yes No

Dual Citizenship country :

Preferred Mode of Communication* : SMS Email

PERMANENT ADDRESS

(English) *

Premises No. : Unit No. :

Address :

Postal Code :

Province * : District * :

Divisional Secretariat* : Grama Niladhari Division * :

RESIDENTIAL ADDRESS

(English) *

Premises No. : Unit No. :

Address :

Postal Code :

Date of Commencement * :

D	D	/	M	M	/	Y	Y	Y	Y
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ADDRESS (English) *

Premises No. :

Unit No.

Address :

Postal Code :

AUTHORIZATION *

I do hereby certify that the particulars furnished by me in this application are true and correct.

Name* :

Designation :

National Identity Card / Passport No. * :

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Signature*:

Date* :

D	D	/	M	M	/	Y	Y	Y	Y
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