	Business, Tax & Customs Registration Form Government of Tuvalu VAIAKU, FUNAFUTI, TUVALU Phone: (688) 20 840, 20239, 20235 Email: tbc@gov.tv, ird@gov.tv or,customs@gov.tv			
Identification Dat	ta			
Entity Type Company Partnersh Sole Trade	ip Corporation			
Legal Name of Business/Entity (when registered) Business Trade Name (If different from legal name)				
Name	% Shares Address			
)				
)				
)				
)				
)				
Name of Accountant:				
Location address of business/entity Postal address of entity				
(Street name and Islan				
(
	Email address:			
	Phone contact:			
	Mobile contact:			
Nature/Activitiy of business/entity:				
Place of Registration:	Non-resident			
If non-resident, show country of residence:				
Date of Incorporation/bus (If already commenced)				
Nature o of business or ot	her main objects:			
The person who is auth	orised to accept service of process on behalf of the			
-				

	Registration Data:					
	i) Do you wish to register as a bu	isiness?	Yes	No		
	If yes to (i) above you should pay a	business registration fe	e of \$100			
	What date do you want regsitration (Commencement date of business)	n to apply				
	Taxpayer registration period: Tax year 31/12 OR approved alternative tax year end /					
	ii) Do you wish to register with customs? (importer/exporters) Yes No					
	iii) Which tax type(s) do you wish to register for? Please tick					
	Personal Income Tax (where you intend to pay employees with at least one receiving more than the \$4,000 tax free threshold)					
	Net Profit Tax Note: If you are not registering for income tax or presumptive tax, provide reasons why you are exempt from tax. Do you expect to have annual taxable income over \$50,000 or not?					
	Presumptive tax (where annual gro income tax instead. Note: If registere Tuvalu Consumption Tax (where a want to register voluntarily) Room Tax (If operating a hotel or gu	ed as a business, will need to nnual gross sales expected to	pay \$100 presumptive	e tax per quarter,		
	iv) How do you wish to receive tax	information?	Tuvalua	In English		
с.	Declaration Panel:					
C.		vidual who should state his/k	per nosition in the hus	iness		
	This application must be signed by an individual who should state his/her position in the business hereby declare that all information completed above is correct.					
	Thereby declare that all information	n completed above is co	rrect.			
	Signature:		rrect. ate:			
	Signature: Name (Printed)					
	Signature: Name (Printed) Position in the business:	D	ate:			
	Signature: Name (Printed) Position in the business: Phone Number of Person signing:		ate:			
	Signature: Name (Printed) Position in the business:	D	ate:			
	Signature: Name (Printed) Position in the business: Phone Number of Person signing:	D	ate:			
	Signature: Name (Printed) Position in the business: Phone Number of Person signing: Email address of person signing:	D	ate: Home:			
	Signature: Name (Printed) Position in the business: Phone Number of Person signing: Email address of person signing: Authorising Officer:	D	ate: Home:	ate:		
	Signature: Name (Printed) Position in the business: Phone Number of Person signing: Email address of person signing: Authorising Officer: Taxpayer Identification Number (TI	D Off: Mobile: Signature: N):	ate: Home:	ate:		
	Signature: Name (Printed) Position in the business: Phone Number of Person signing: Email address of person signing: Authorising Officer: Taxpayer Identification Number (TI Documents attached (Please ti	D Off: Mobile: Signature: N):	ate: Home:	ate:		
	Signature: Name (Printed) Position in the business: Phone Number of Person signing: Email address of person signing: Authorising Officer: Taxpayer Identification Number (TI Documents attached (Please tight)	D Off: Mobile: Signature: N): ick if applicable) Company	ate: Home: D			
	Signature: Name (Printed) Position in the business: Phone Number of Person signing: Email address of person signing: Authorising Officer: Taxpayer Identification Number (TI Documents attached (Please ti Partnership Partnership Deed	D Off: Mobile: Signature: N): ick if applicable) Company Memorandum or	ate:Home:D			
	Signature: Name (Printed) Position in the business: Phone Number of Person signing: Email address of person signing: Authorising Officer: Taxpayer Identification Number (TI Documents attached (Please ti Partnership Deed Partnership Agreement	D Off: Mobile: Signature: N): ick if applicable) Company Memorandum or Charter or statute	ate:Home:D			
	Signature: Name (Printed) Position in the business: Phone Number of Person signing: Email address of person signing: Authorising Officer: Taxpayer Identification Number (TI Documents attached (Please ti Partnership Partnership Deed Partnership Agreement Evidence in writing of the terms on	D Off: Mobile: Signature: N): ick if applicable) Company Memorandum or Charter or statute Certificate of Inco	ate: Home: D D Articles of Association	1		
	Signature: Name (Printed) Position in the business: Phone Number of Person signing: Email address of person signing: Authorising Officer: Taxpayer Identification Number (TI Documents attached (Please ti Partnership Deed Partnership Agreement	D Off: Mobile: Signature: N): ick if applicable) Company Memorandum or Charter or statute Certificate of Inco Copy of Prospectu	ate: Home: D D Articles of Association e prporation us inviting subscription	1		
	Signature: Name (Printed) Position in the business: Phone Number of Person signing: Email address of person signing: Authorising Officer: Taxpayer Identification Number (TI Documents attached (Please ti Partnership Partnership Deed Partnership Agreement Evidence in writing of the terms on	D Off: Mobile: Signature: N): ick if applicable) Company Memorandum or Charter or statute Certificate of Incc Copy of Prospectu shares or debentu	Articles of Association Proporation us inviting subscription ures in Tu-8	1		
	Signature: Name (Printed) Position in the business: Phone Number of Person signing: Email address of person signing: Authorising Officer: Taxpayer Identification Number (TI Documents attached (Please ti Partnership Partnership Deed Partnership Agreement Evidence in writing of the terms on	D Off: Mobile: Signature: N): ick if applicable) Company Memorandum or Charter or statute Certificate of Inco Copy of Prospectu	Articles of Association Proporation us inviting subscription ures in Tu-8	1		

(Nov 2009 version)