

SAINT CHRISTOPHER AND NEVIS INLAND REVENUE DEPARTMENT DISCOUNTED VAT RATE DAY APPLICATION



VAT-004

Note: Applications must be returned to the Inland Revenue Department before the 7th of December 2018.

SECTION 1 - TAXPAYER IDENTIFICATION

VAT REGISTRATION NO.:	<input style="width: 100%; height: 20px;" type="text"/>										
REGISTERED NAME:	<input style="width: 100%; height: 25px;" type="text"/>										
TRADE NAME:	<input style="width: 100%; height: 25px;" type="text"/>										
BUSINESS ADDRESS:	<input style="width: 100%; height: 25px;" type="text"/>										
CITY / TOWN / VILLAGE:	<input style="width: 100%; height: 25px;" type="text"/>					ISLAND:	<input style="width: 100%; height: 25px;" type="text"/>				
HOME PHONE:	<input style="width: 100%; height: 25px;" type="text"/>			WORK :	<input style="width: 100%; height: 25px;" type="text"/>			MOBILE :	<input style="width: 100%; height: 25px;" type="text"/>		
E-MAIL ADDRESS:	<input style="width: 100%; height: 25px;" type="text"/>										

Please note: Taxpayers who have any outstanding liabilities with the Inland Revenue Department (IRD) or the Customs and Excise Department will not be eligible to participate in the Discounted VAT Rate Day unless arrangements are made in advance to settle all outstanding liabilities.

SECTION 2 - PLEASE CHECK THE APPROPRIATE BOX

		YES	NO
(1) Do you have any outstanding taxes, licenses or fees with the Inland Revenue Department ?	(1)	<input type="checkbox"/>	<input type="checkbox"/>
(2) Do you have any pending Objections with the Inland Revenue Department ?	(2)	<input type="checkbox"/>	<input type="checkbox"/>
(3) If Yes to No. 2, have you satisfied all conditions of this objection, including submitting payment of 50% of tax in dispute?	(3)	<input type="checkbox"/>	<input type="checkbox"/>
(4) Do you have any outstanding taxes, licenses or fees with the Customs and Excise Department?	(4)	<input type="checkbox"/>	<input type="checkbox"/>
(5) I intend to participate in the Discounted VAT Rate Day on 14th December, 2018.	(5)	<input type="checkbox"/>	<input type="checkbox"/>
(6) I intend to participate in the Discounted VAT Rate Day on 20th December, 2018.	(6)	<input type="checkbox"/>	<input type="checkbox"/>

SECTION 3 - DECLARATION

I declare that the information given on this application form is, to the best of my knowledge, true, correct and complete, and that I have the authority to make this disclosure of the information provided.

SIGNATORY FULL NAME:	<input style="width: 100%; height: 25px;" type="text"/>		
	DAY	/	MONTH
	/	YEAR	
SIGNATURE OF APPLICANT			

SECTION 4 - FOR OFFICIAL USE ONLY

DATE RECEIVED	DAY	/	MONTH	/	YEAR	DOC. NO.:	<input style="width: 100%; height: 25px;" type="text"/>									
APPROVED:	<input type="checkbox"/>	NOT APPROVED:	<input type="checkbox"/>													
APPROVED /NOT APPROVED BY:	<input style="width: 100%; height: 25px;" type="text"/>															
REASON NOT APPROVED:	<input style="width: 100%; height: 40px;" type="text"/>															