



GOVERNMENT OF KIRIBATI
KIRIBATI TAX DIVISION

P.O. Box 67, Bairiki, Tarawa, Republic of Kiribati,
Telephone: (686) 740 21 806 Switchboard, Ext: 210, (686) 720-21806 Direct Line, Email: tax@mfp.gov.ki

Non-Resident Application for Tax Identification Number and VAT Registration

Value Added Tax Act 2013, Revenue Administration Act, 2013

General Instructions: Use this form if you are a non-resident who will be earning income or making supplies that will be subject to tax in Kiribati.

1	Do you already have a TIN:	1	Yes	<input type="checkbox"/>	No	<input type="checkbox"/>
2	TIN:	2	<input type="text"/>			
3	Legal Name of Taxpayer	3	<input type="text"/>			
4	Address	4	<input type="text"/>			
5	Postal Address (If different from above)	5	<input type="text"/>			
6	E-mail Address	6	<input type="text"/>			
7	Phone Number	7	<input type="text"/>			
8	Tax Agent Name:	8	<input type="text"/>			
9	E-mail Address of Tax Agent	9	<input type="text"/>			
10	Phone Number of Tax Agent	10	<input type="text"/>			
11	If a Company, where Registered	11	<input type="text"/>			
12	Registered Number	12	<input type="text"/>			
VAT Representative						
13	Name	13	<input type="text"/>			
14	Postal Address	14	<input type="text"/>			
15	Telephone number	13	<input type="text"/>			
15	Nature of Business	15	<input type="text"/>			
16	Bank Details: Name of Bank	16A	<input type="text"/>			
	Address of Bank	16B	<input type="text"/>			
	Account Holder	16C	<input type="text"/>			
	Branch Code	16D	<input type="text"/>			
	Account Number	16E	<input type="text"/>			
	Suffix (if applicable)	16F	<input type="text"/>			
17	Resident in Kiribati for Tax Purposes?	17	Yes	<input type="checkbox"/>	No	<input type="checkbox"/>

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If No, where resident for tax purposes?

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Additional Information about your business

19 **Proof of identity document attached** 19
 You must attach a document which proves your identity. See instructions on the next page.

20 **Date of commencing business or supplies in Kiribati?** 20

21 **Are you required to withhold tax from any payments to employees or contractors in Kiribati?**
21 No Yes

22 **Shareholders/ Related Persons**, Provide the following information in respect to members.
 (If require more lines please attach a schedule with the complete list of members)

	Name of Member	Number of Shares held	Resident in Kiribati for tax purposes? Write Yes or No
22A			
22B			
22C			

Additional VAT Questions

23 **Was your turnover (taxable supplies) in the last 12 months more than \$100,000?**
23 No Yes

24 **Do you expect turnover (taxable supplies) in the next 12 months to be more than \$100,000?**
24 No Yes

If you answered yes to question 25 or 26 you are required to register for VAT and file VAT returns from the date you are VAT registered. If you answered no to both question 25 and 26 you do not have to register for VAT.

25 **Will you make exempt supplies?**
25 No Yes

26 **Are you an exporter?**
26 No Yes

27 **Are you an importer?**
27 No Yes

28 **Declaration by taxpayer/ VAT Representative**

The information I have provided in this application is true and correct

Signature .../... /
Date