

TAX REGISTRATION

This form can be used to register a limited company and other bodies such as those listed at 5 below, for Corporation Tax, for PAYE/PRSI (as an employer), for VAT and/or Relevant Contracts Tax (RCT).

Persons, other than companies and bodies listed at 5 below, requiring to register should complete **Form TR1** or **PAYE employees** taking up their first employment should complete **Form 12A**.

ALL companies are required to make payments and returns by electronic means using ROS. Details on ROS and the returns and related tax liabilities that must be paid and filed electronically are available on **www.revenue.ie**.

Complete all parts of this form as required (* denotes a required field) in BLOCK LETTERS, sign the declaration below and return it to your Revenue District, details can be found on www.revenue.ie. Without accurate information the registration(s) will be delayed and/or you may experience delays in receipt of Returns and other forms.

Pa	art A		General Details																	
1.	State the full name of the is registered under the Co																			
2.	If trading under a busines																			
3.	Business Address *																			
	Phone (inc. area code)									Website										
	Mobile No.									E-Mail										
4.	. Registered Office Address *																			
	Phone (inc. area code)									E-Mail										
5.	Legal Format (Tick ☑	appropria	te box	()																
	Legal Format (Tick ☑ appropriate box) Co-Operative Society						Private Unlimited Company						Statutory Body							
	Public Limited Company					Private Limited Company							Branch of Foreign Company							
	Other (specify)																			
6.	Date company was regist	тра	mpanies)*						D	D M	M	Υ	Υ	Υ	Υ					
7.	. Companies Registration Office (CRO) number (Irish registered companies)*																			
8.	. When did the business or activity commence?*												D	D M	M	Υ	Υ	Υ	Υ	
9.	9. To what date will annual accounts be made up?*												D	D M	M	Υ	Υ	Υ	Υ	
10.	If you want your tax affair	rs to be d	ealt v	vith i	n Iri	ish, 1	tick	☑ tl	he b	ох										
11. If the company was registered for any tax in							Co	orpo	orati	on Tax										
	this country previously what reference numbers did it hold?					S	Er	nplo	oyer	(PAYE/PRSI)									
						Value Added Tax														
							Re	elev	ant	Contracts Ta	x (RCT)									
12.	Type of Business*																			
	(a) Is the business mainly retail					mainly wholesale						mainly manufacturing								
	building & construction						forestry/meat processing						service and other							
(b) Describe the business conducted in as much deta 'dairy farmer', 'textile manufacturer', 'property letti 'shopkeeper', 'manufacturer', 'computers', 'consul property related activity you may also need to con								ves etc.	tme If th	nt income', e le application	tc. Do n e							s		
(c) State the company's expected turnover in the nex							ext 12 months						€							

General Details

	Name		Private Address								- Ch		DDON												
	Name				Priv	ale A	uares	5		_ -	Sh	PPSN							_						
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													_		%										
15.	Company Secretary, if the Give the following information acting precedent partner	atio	n in re	spec	t of a	all par	tners	, trus	tees	or o	ther o	ffice	rs. I						ate [,]	whe	ethe	r			
	Name		Private Address							ess	is						PPSN								
16.	Shareholders, give the omore beneficial interest i			ed ca	apital				an a	dire						e sh	owr	abc				ıs 30)% (or	
	Name		Private Address						_	Shareholding					PPSN						_				
													_		%									<u> </u>	
17.	Adviser Details, give the accounts and tax returns Name					of the o	comp	any's	acc	ount	ant or	tax	adv	riser	, it a	iny,	who	O Will	pre	par	e th	e 			
	Address																								
	Phone (inc. area code)										E-M	ail													
	Contact name for Adviso	r																							
	Tax Adviser Identification	Nu	ımber	(TAIN	1)						Mob	ile N	Ю.												
	Client's Reference					<u> </u>	<u>'</u>		<u>'</u>									<u>'</u>				-			
	If correspondence relat	ing	to the	foll	owir	ng is l	being	j dea	lt wit	h b	y the	асс	oun	tant	or	tax	adv	/iser	tic	k ☑	rele	evar	nt b	ох	
			VAT (i.	e. V	AT3's	s) [R	СТ					Em	ploy	/er l	PAY	E/PF	RSI		
18.	If the business premise (i) The name and private (not an estate agent of	e ac	ddress	of th	e lar																				
	(ii) The amount of rent paid per: week month or year (Tick ☑ frequent										eque	ency	')	€											
	(iii) The date on which the company started paying the rent															D	D	M	M	Υ	Υ	Υ	Y		
	(iv) The length of the agree	eed	rental	/leas	е ре	riod												1	<u> </u>	1	1	1			
19.	If you acquired the bus (i) The name and curren from whom it was acc	t ac	ddress				owne	r, sta	ite																

Part B	Registration for Corporation Tax (CT)
20. If the company is registering	g for Corporation Tax tick	
Part C	Registration for VAT	
21. If the company is registering	g for VAT tick ☑ box and complete this part	
22. Registration		
(a) State the date from which	the company requires to register for VAT *	D D M M Y Y Y
	nt only in respect of European Union (EU) es only to farmers and non-taxable nt box)	Yes No
prescribed by law fo or (ii) you wish to elect it not obliged by law to or (iii) you are in receipt of	or is likely to exceed the limits or registration? to be a taxable person, (although	(i) ☐ Tick ☑ either (i), (ii) or (iii) as appropriate
23. Are you applying for the mo for goods and services? (tic	neys received basis of accounting k ☑ the relevant box)	Yes No
If your answer is 'Yes', is this b	pecause	
. , .	ver will be less than €2,000,000 (net of VAT)?	(a) ☐ Tick ☑ either (a) or (b)
· ·	spected annual turnover will come from supplying persons who are not registered, e.g. hospitals, public?	(b) as appropriate
24. State the expected annual to	urnover from supplies of taxable goods or services within	the State *
25. State your bank or building	society account to which refunds can be made	
Bank/Building Society		
Branch Address		
IBAN (Max. 34 characters)		
BIC (Max. 11 characters)		
26. Developer/Landlord - Prope	rty details for VAT purposes	
(a) Address of the property		
(b) Date purchased or when d	evelopment commenced	D D M M Y Y Y
(c) Planning permission refere	ence number, if applicable	
question would be purchas a VAT liability, e.g. by sale * The minutes should show	es of the meeting or signed statement*, where it was resolved sed and/or developed and would be disposed of or used in a mof the property or by exercising the Landlord's 'option to tax'. If the date of the meeting, the names of all those present at the yor precedent acting partner in the case of a partnership.	nanner which would give rise to
	signed by the company secretary or director.	AAV.E.(DDQ)
Part D	Registration as an Employer for P	
, , ,	s an employer for PAYE/PRSI tick ☑ box and complete this pa	ait
28. Persons Engaged (a) How many employees are	e: Full time - usually working 30 hours or more per week?	
	Part time - usually working less than 30 hours per week?	
(b) State the date your first em	nployee commenced or will commence in your employment *	D D M M Y Y Y

Part D (continued)	Registration as an Employer for PAYE/PRSI						
29. What payroll and PAYE/PRSI rec	ord system will you use? (Tick ☑ the relevant box)						
	f you are using a computerised payroll package you should register for the Revenue On-Line Service (ROS) at www.revenue.ie to receive electronic copies of Tax Credit Certificates and to file your P35 End of Year Return on-line.						
(b) Other Manual System	Nages books are available from Office Suppliers/Stationery Bookstores.						
30. Correspondence on PAYE/PRSI If correspondence relating to PAYE and give the following details, if diffi	E/PRSI is being dealt with by an agent, tick ☑ this box ferent from Panel 17 page 2.						
Name							
Address							
Phone (inc. area code)	E-Mail						
Tax Adviser Identification Number ((TAIN) Mobile No.						
Client's Reference							
Part E	Registration for Relevant Contracts Tax (RCT)						
Principal Contractors are obliged to Reverse Charge rules. Please refer t	obliged to use Revenue's Online Service to fulfill their RCT obligations. register and account for VAT in relation to Construction Services under the VAT to Part C of this form, Registration for VAT). Detailed information on RCT and VAT, actor obligations, is available on the Revenue website www.revenue.ie						
(a) Principal only	(b) Principal & Subcontractor (c) Subcontractor only						
If (a) or (b) applies, please provide the number of subcontractors engaged.							
32. Date of Commencement for RCT *							
agent willing to carry out all RC1	have you registered for ROS, or have you an Tfunctions who is registered for ROS? Ion Number (TAIN) of your agent, if applicable						
34. Have you previously registered v	with Revenue as a Principal? Yes No						
35. If so, state the date you last ceas							
Additional Information							
The following leaflets will provide addition www.revenue.ie	onal information on the taxation aspects of running a business. They are available at						
Guide to Value Added Tax Employer's Guide to PAYE Employers Guide to Benefit-in-kind Code of Practice for Determining E	l Employment or Self-Employment Status of Individuals						
	e contact your local Revenue office or Employer Helpline at LoCall 1890 25 45 65.						
• • • • • • • • • • • • • • • • • • • •	tions, including Direct Debit, contact the Collector-General at LoCall 1890 20 30 70.						
You can access ROS and get more info							
Declaration	This must be made in every case before the company can be registered for tax						
I declare that the particulars sup	plied by me in this application are true in every respect						
Name (in BLOCK LETTERS)*							
Signature*							
Capacity of Signatory* (To be signed by the company seci	retary or other authorised officer)						