

SECTION 3 - DESCRIPTION OF BUSINESS ACTIVITIES

* Primary Activity : ISIC Code:

Enterprise Started Date: / /

ISIC Code of secondary activities: (if none, put N/A)

1. 3. 5. 7. 9.
 2. 4. 6. 8. 10.

Questions:

1. Do the enterprise has an investment certificate?	<input type="checkbox"/> No	<input type="checkbox"/> Yes	
2. How many employees will you have?			Non-resident: _____ ; Resident: _____
3. What is the expected gross income during the first 12 months of operations?			_____ USD
4. Will the enterprise be paying rent for land, buildings, or apartments?	<input type="checkbox"/> No	<input type="checkbox"/> Yes	-----> If Yes, Please provide Withholdee TIN: <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>
5. Will the enterprise be paying for services/subcontracts to individuals or enterprises outside Timor-Leste?	<input type="checkbox"/> No	<input type="checkbox"/> Yes	
6. Will the enterprise be receiving royalties?	<input type="checkbox"/> No	<input type="checkbox"/> Yes	
7. Will the enterprise provide construction and consulting services?	<input type="checkbox"/> No	<input type="checkbox"/> Yes	
8. Will the enterprise provide air or sea transportation services?	<input type="checkbox"/> No	<input type="checkbox"/> Yes	
9. Will the enterprise be providing designate services?	<input type="checkbox"/> No	<input type="checkbox"/> Yes	-----> If Yes, <input type="checkbox"/> Catering <input type="checkbox"/> Hotel <input type="checkbox"/> Bar <input type="checkbox"/> Restaurant <input type="checkbox"/> Telecommunication

SECTION 4 - SUPPORTING DOCUMENT

<input type="checkbox"/> Copy of the Articles of Company	<input type="checkbox"/> List of Employee Citizen and Non - Resident (TIN)
<input type="checkbox"/> Copy of Certidão Registo Comercial - CRC	Important: If Employee does not has a TIN, please fill up Individual form and submit with employment contract.
<input type="checkbox"/> Map location of each establishment	

SECTION 5 - TAXPAYER DECLARATION

I, _____ (name of Owner applicant or official Representative) certify that all of the information provided by me is true and accurate. I am aware that providing false information is punishable by Law.

Signature of applicant or official Representative: _____ Date: ____/____/____

Please contact the National Directorate of Domestic Revenue if you have any questions about this application form, tax matters or tax obligations. You are responsible to know the **tax laws** of Timor-Leste as they apply to you. The **tax laws** and explanations are available on <https://attl.gov.tl/>.

OFFICE USE ONLY

Approved TIN Registered: _____

Rejected Reason: _____

Tax Division assigned to: Dili Baucau Bobonaro RAEOA Lautem Viqueque Manatuto Aileu
 Suai Ermera Maliana Ainaro Bobonaro

Official Name: _____ Signature _____ Date: ____/____/____