



TIN APPLICATION NON-PROFIT ORGANIZATION

FORM

SECTION 1 - GENERAL INFORMATION

(Legal base: Under the sec. 48 of UNTAET REGULATION 2000/18 as amended)

Organization Name:

Organization Type:

- NGO
 ASSOCIATION
 EMBASSY
 CHARITY
 GOVERNMENT
 FOUNDATION
 CHURCH
 OTHERS

Mailing Address:

Country :

District:

Sub-District:

Village:

Street Name:

Postcode:

Contact Information :

Email:

Phone:

Fax No:

For official correspondence !

- Email Address
 Mailing Address

Preferred Language of Correspondence:

- Tetun
 Portuguese
 English

SECTION 2 - DIRECTOR OF ORGANIZATION

Director Name : * TIN :

Important: At least one Director or Representative living in Timor-Leste must be designated as responsible for tax matters.

Name of Representative in Timor-Leste :

* TIN (proof required):

SECTION 3 - DESCRIPTION OF ACTIVITIES

* Main Activity: ISIC Code:

Date Started: / /

ISIC Code of Secondary Activities: (if none, put N/A)

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

Questions:

1. Will there be any non-resident employees?	<input type="checkbox"/> No <input type="checkbox"/> Yes	-----> If Yes, how many?	<input type="text"/> <input type="text"/> <input type="text"/>
2. How many resident employees will you have?	<input type="checkbox"/> No <input type="checkbox"/> Yes	-----> If Yes, how many?	<input type="text"/> <input type="text"/> <input type="text"/>
3. Do you pay a RENT?	<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"/> <input type="text"/> <input type="text"/>
		-----> If Yes, Start Date:	<input type="text"/> <input type="text"/> - <input type="text"/> <input type="text"/> - <input type="text"/> <input type="text"/>

SECTION 4 - SUPPORTING DOCUMENT

- CCR - Certidão Comprovativo do Registo
- Requerimento de Admissibilidade da Firma
- Location Map of Establishment
- Copy of Timor-Leste Citizen Card
- Copy Foreiner Passport (For Non-Resident)
- List of Employee (Citizen and Non - Resident)

SECTION 5 - TAXPAYER DECLARATION

I, _____ (name of Director 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: ____/____/____