

DIRECÇÃO GERAL RECEITAS

DIRECÇÃO NACIONAL DE RECEITA PETROLIFERAS E MINERAIS

Building #5 (Ground Floor), Palacio do Governo RDTL, Avenida do Presidente de Nicolau Lobato P.O Box-18, Dili, Timor-Leste, Phone- +(670) 333 9542

Web: www.mof.gov.tl/Taxation/Petroleum

um bom cidadão, seja um novo héroi para

TAX IDENTIFICATION NUMBER (TIN) REGISTRATION FORM FOR PETROLEUM TAXPAYERS				
1. DO YOU HAVE A TAX IDENTIFICATION NUMBER (TIN)? If 'yes', please provide your TIN Yes No				
2. ENTERPRISE TYPE (place an X in one box only) □ Sole trader □ General Partnership □ Partnership Limited by Shares □ Single shareholder private company □ Private Limited Company □ Joint Stock Company □ Unincorporated Association □ Other (give details)				
3. WHAT IS THE LEGAL NAME OF YOUR ORGANIZATION (TAXPAYER)?				
(i.e. Partnership/Joint Venture name, Company Name, Trust Name. If you are a sole trader, the owner's name.) IF YOU ARE A SOLE TRADER, WHAT IS YOUR DATE OF BIRTH?/ (dd/mm/yyyy)				
4. WHAT IS YOUR BUSINESS REGISTRATION NO.?				
Provide a copy of your Business Registration Certificate Copy attached				
5. TO BE COMPLETED BY COMPANIES ONLY What is your country of incorporation? Company must provide a copy of their certificate of incorporation and a copy of the company's memorandum or agreement, articles of association and IDs valid (passport and Individual Id Cards valid) of the person who signs this TIN application form on behalf (authorization Letter) of the taxpayer. Tick (X) in box as below:				
Certificate of Incorporation Articles of Association Attached				
6. WHAT IS YOUR MAIN TRADING NAME?				
7. WHAT DATE DID YOU COMMENCE, OR DO YOU INTEND TO COMMENCE BUSINESS ACTIVITIES IN TIMOR-LESTE EXCLUSIVE AREA (Onshore or Offshore) OR JPDA? (dd/mm/yyyy)				
8. LOCATION OF THE BUSINESS (PLEASE TICK X IN BOX)				
Bayu-Undan Greater Sunrise Non- Annex F JPDA area (offshore/onshore)				
9. WHAT IS YOUR TRADE TYPE (Place an X in one box only) Oil and Gas Operations □ Construction and/or Consultancy □ Drilling Services □ Support Services to Oil and Gas Industry □ Other □				
10. BRIEFLY DESCRIBE THE MAIN ACTIVITY FROM WHICH YOU DERIVE MOST OF YOUR BUSINESS INCOME				
(a) Type of business operation (for example: oil & gas, construction, drilling works, shipping, air transport, supply etc.)				
(b) Source of Operations (i) PSC Area:				

NDPMR Contact E-mails: <u>jxavier@mof.gov.tl</u> or <u>hsarmento@mof.gov.tl</u> or <u>aramos@mof.gov.tl</u>

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11. ARE YOU A RESIDENT OF TIMOR LESTE FOR TAX PURPOSE? Yes \square No \square IF NO, DO YOU HAVE A PERMENANT ESTABLISHMENT (PE) IN TIMOR LESTE? Yes \square No \square					
		` ,		es	
If your answers are no to both of JPDA or in Timor-Leste in any 12			you will be conduc	eting activities in the	
12. IN WHICH LANGUAGE W	OUI D VOU PREFER TO	PECEIVE COPPES	PONDENCE AND	PURI ICATIONS	
FROM THE NATIONAL DI			ONDENCE AND	TOBLICATIONS	
	l Tetum □ Bahasa Indonesi				
13. WHAT IS YOUR ESTIMAT			\$	USD	
14. WHAT IS YOUR MAIN TR	ADING ADDRESS?				
Telephone Number					
Fax Number		_ E-mail Address			
15. WHAT IS YOUR ADDRESS	FOR CORRESPONDENC	CE CE			
16. NUMBER OF PAID EMPLO	OYEES? 0 □	1-4	5-20 □	20+ □	
		1-4 ⊔	3-20 山	20+ 山	
(Place an X in one box or	• *				
Please fill number of Employ		N			
Resident employees	persons	Non-Resident Empl	•	-	
If there is any change in number of Employees, please confirm with Timor-Leste Tax Authority, with official documents					
17. CONTACT DETAILS					
Provide contact details of the	person that we can contact to	discuss your tax affairs	during ordinary bu	siness hours	
		,			
Family Name	Given Name		Other Names		
Position					
Telephone Number					
Fax Number		E-mail Address			
18. MULTIPLE ESTABLISHM					
DO YOU HAVE MORE TH				o 🗖	
List the details of each es	tablishment owned by y	ou (other than the n	nain establishme	nt). If you have	
more than one additional	establishment, please pr	ovide the details on	a separate shee	t of paper.	
Trading Name					
Trading NameStreet No	Street Name				
Village	Sub-district		District		
Telephone Number		_ Mobile Number		·	
Fax Number		E-mail Address			
Date of business activity	commenced	/	/(0	ld/mm/yyyy)	
Business Activity					
•					

19. ARE YOU PAYING RENT ON ANY/	ALL OF YOUR PREMISES IN T	TIMOR-LESTE? Yes □ No □	
If 'yes', what is your total monthly renta	l payment? \$	USD	
LANDLORD DETAILS:			
Title Family Name	Given Name	Other Names	
Street No	Sub district	District	
Fmail:	Sub-district Telephone Number	Bistrict Mobile	
Number		WIODIIC	
20 ENTERDRICE OWNERSHIP DETAIL	IS (Only complete this if you are a	partner in a partnership/joint venture or trustee	
of a trust. Provide details of additional ow		partner in a partnersing/joint venture of trustee	
Tax Identification Number (TIN)	1 1		
Title Family Name		Other Names	
Date of Birth / /	dd/mm/vvvv) Position he	eld: Partner Trustee	
Ownership start date//	(dd/mm/yyyy)	eld: Partner	
_		-	
21. All contact person during trading activ	vities (min: 3 persons) from inter	nal of your company not from consultants or	
other persons, if there is any change ple	ease inform Timor-Leste Tax Aut	hority in advance.	
		TR 11 (1	
Name	Position	Email in active	
1			
2			
3			
COMMENTS/ADDITIONAL INFORMATIONAL INFORMATION AND ADDITIONAL ADDITI	TION	<u> </u>	
DECLARATION			
		ENTERPRISE AND CERTIFY THAT THE	
INFORMATION GIVEN ON THIS APPLICA	TION IS COMPLETE AND CORRI	ECT.	
SIGNATURE		DATE	
SIGNATURE		DATE	
NAME		DESIGNATION	
NAME		DESIGNATION	
	NDPMR OFFICE USE ONI	V	
TIN: TIN L			
Tax Account Numbers to be maintaine		Date	
Tax Account Numbers to be maintaine	tu iii SIGTAS.		
PETROLEUM FWTAX NRES	PETROI	LEUM FWTAX RES	
PETROLEUM WAGES NRES	PETROL	PETROLEUM WAGES RES	
PETROLWUM VAT	PETROL	PETROLEUM INCOME TAX	
PETROLEUM APT	PETROL	PETROLEUM SPT	
Note: Properly filled in registration form sho		of Petroleum and Mineral Revenue through pos	

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