



# DIRECÇÃO GERAL RECEITAS

## DIRECÇÃO NACIONAL DE RECEITA PETROLÍFERAS E MINERAIS

Building #5 (Ground Floor), Palácio do Governo RDTL, Avenida do Presidente de Nicolau Lobato

P.O Box-18, Dili, Timor-Leste

Web: [www.mof.gov.tl/Taxation/Petroleum](http://www.mof.gov.tl/Taxation/Petroleum)

*“Seja um bom cidadão, seja um novo herói para a nossa Nação”*

### TAX IDENTIFICATION NUMBER (TIN) REGISTRATION FORM FOR PETROLEUM TAXPAYERS

#### 1. DO YOU HAVE A TAX IDENTIFICATION NUMBER (TIN)?

Yes ☐ No ☐

If 'yes', please provide your TIN

#### 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 Number.?

\_\_\_\_ REGISTRATION DATE \_\_\_\_/\_\_\_\_/\_\_\_\_

Provide a copy of your Business Registration Certificate from Timor-Leste

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

Attached ..... ☐

Articles of Association

attached ..... ☐

Memorandum of Agreement

attached ..... ☐

Id as Passport and Id Card

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 ☐

Timor-Leste Exclusive 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: \_\_\_\_\_ (For PSC Contractors)

(ii) Name (s) of major client(s): i) \_\_\_\_\_ (For Sub-contractors)

ii) \_\_\_\_\_

iii) \_\_\_\_\_

Please provide the attached copy of the contract agreement

NDPMR Contact E-mails: [hsarmento@mof.gov.tl](mailto:hsarmento@mof.gov.tl) or [aramos@mof.gov.tl](mailto:aramos@mof.gov.tl) or [adcosta@mof.gov.tl](mailto:adcosta@mof.gov.tl) or [Uurodriques@mof.gov.tl](mailto:Uurodriques@mof.gov.tl) or [mofsoares@mof.gov.tl](mailto:mofsoares@mof.gov.tl)

PTD Form No: 02-01-01 Last updated 09/02/2017

<b>11. ARE YOU A RESIDENT OF TIMOR LESTE FOR TAX PURPOSE?</b> Yes <input type="checkbox"/> No <input type="checkbox"/> <b>IF NO, DO YOU HAVE A PERMANENT ESTABLISHMENT (PE) IN TIMOR LESTE?</b> Yes <input type="checkbox"/> No <input type="checkbox"/> If your answers are no to both of the above questions, Number of approximate days you will be conducting activities in the JPDA or in Timor-Leste in any 12 months period: ..... Days					
<b>12. IN WHICH LANGUAGE WOULD YOU PREFER TO RECEIVE CORRESPONDENCE AND PUBLICATIONS FROM THE NATIONAL DIRECTORATE OF PETROLEUM REVENUE?</b> English <input type="checkbox"/> Portuguese <input type="checkbox"/> Tetum <input type="checkbox"/> Bahasa Indonesia <input type="checkbox"/>					
<b>13. WHAT IS YOUR ESTIMATED ANNUAL GROSS REVENUE?</b> \$ _____ <b>USD</b>					
<b>14. WHAT IS YOUR MAIN TRADING ADDRESS?</b> _____ _____ Telephone Number _____ Mobile Number _____ Fax Number _____ E-mail Address _____					
<b>15. What is your branch or representative address in Timor-Leste :</b> _____ _____ <b>Address</b> ..... <b>Telephone</b> ..... <b>Number</b> ..... <b>Mobile</b> ..... <b>Number</b> ..... <b>Fax Number</b> ..... <b>E-mail Address</b> .....					
<b>15. WHAT IS YOUR ADDRESS FOR CORRESPONDENCE</b> _____ _____					
<b>16. NUMBER OF PAID EMPLOYEES?</b> 0 <input type="checkbox"/> 1-4 <input type="checkbox"/> 5-20 <input type="checkbox"/> 20+ <input type="checkbox"/> (Place an X in one box only) Please fill number of Employees are <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 25%;"><b>Resident employees</b></td> <td style="width: 25%;">..... <b>persons</b></td> <td style="width: 25%;"><b>Non-Resident Employees</b></td> <td style="width: 25%;">..... <b>persons</b></td> </tr> </table> If there is any change in number of Employees, please confirm with Timor-Leste Tax Authority, with official documents		<b>Resident employees</b>	..... <b>persons</b>	<b>Non-Resident Employees</b>	..... <b>persons</b>
<b>Resident employees</b>	..... <b>persons</b>	<b>Non-Resident Employees</b>	..... <b>persons</b>		
<b>17. CONTACT DETAILS</b> Provide contact details of the person that we can contact to discuss your tax affairs during ordinary business hours Family Name _____ Given Name _____ Other Names _____ Position _____ Telephone Number _____ Mobile Number _____ Fax Number _____ E-mail Address _____					
<b>18. MULTIPLE ESTABLISHMENTS</b> <b>DO YOU HAVE MORE THAN ONE TRADING NAME?</b> Yes <input type="checkbox"/> No <input type="checkbox"/> List the details of each establishment owned by you (other than the main establishment). If you have more than one additional establishment, please provide the details on a separate sheet of paper. <b>Trading Name</b> _____ <b>Street No.</b> _____ <b>Street Name</b> _____ <b>Village</b> _____ <b>Sub-district</b> _____ <b>District</b> _____ <b>Telephone Number</b> _____ <b>Mobile Number</b> _____ <b>Fax Number</b> _____ <b>E-mail Address</b> _____ <b>Date of business activity commenced</b> ____/____/____ (dd/mm/yyyy) <b>Business Activity</b> _____					

**19. ARE YOU PAYING RENT ON ANY/ALL OF YOUR PREMISES IN TIMOR-LESTE ?** Yes ☐ No ☐

If 'yes', what is your total monthly rental payment? \$ \_\_\_\_\_ USD

**LANDLORD DETAILS:**

Title \_\_\_\_\_ Family Name \_\_\_\_\_ Given Name \_\_\_\_\_ Other Names \_\_\_\_\_

Street No. \_\_\_\_\_ Street Name \_\_\_\_\_

Village \_\_\_\_\_ Sub-district \_\_\_\_\_ District \_\_\_\_\_

Email : \_\_\_\_\_ Telephone Number \_\_\_\_\_ Mobile Number \_\_\_\_\_

**20. ENTERPRISE OWNERSHIP DETAILS** (Only complete this if you are a partner in a partnership/joint venture or trustee of a trust. Provide details of additional owners on a separate sheet of paper.)

Tax Identification Number (TIN) \_\_\_\_\_

Title \_\_\_\_\_ Family Name \_\_\_\_\_ Given Name \_\_\_\_\_ Other Names \_\_\_\_\_

Date of Birth \_\_\_\_/\_\_\_\_/\_\_\_\_ (dd/mm/yyyy) Position held: Partner ☐ Trustee ☐

Ownership start date \_\_\_\_/\_\_\_\_/\_\_\_\_ (dd/mm/yyyy) % Ownership in business \_\_\_\_\_%

**21. All contact person during trading activities (min : 3 persons) from internal of your company not from consultants or other persons, if there is any change please inform Timor-Leste Tax Authority in advance.**

	Name	Position	Email in active
1			
2			
3			

**COMMENTS/ADDITIONAL INFORMATION**

**DECLARATION**

*I DECLARE THAT I AM CARRYING ON THE ABOVE MENTIONED ENTERPRISE AND CERTIFY THAT THE INFORMATION GIVEN ON THIS APPLICATION IS COMPLETE AND CORRECT.*

**SIGNATURE**

**DATE**

\_\_\_\_\_

**NAME**

**DESIGNATION**

\_\_\_\_\_

**NDPMR OFFICE USE ONLY**

**TIN:** \_\_\_\_\_ **TIN Letter delivered by:** \_\_\_\_\_ **Date** \_\_\_\_\_

**Tax Account Numbers to be maintained in SIGTAS:**

**PETROLEUM FWTAX NRES**

**PETROLEUM WAGES NRES**

**PETROLWUM VAT**

**PETROLEUM APT**


**PETROLEUM FWTAX RES**

**PETROLEUM WAGES RES**

**PETROLEUM INCOME TAX**

**PETROLEUM SPT**


Note: Properly filled in registration form should be sent to National Directorate of Petroleum and Mineral Revenue through postal mail to P.O Box No. 18, Dili, Timor Leste or electronically to anyone of the following contacts.

NDPMR Contact E-mails: [hsarmento@mof.gov.tl](mailto:hsarmento@mof.gov.tl) or [aramos@mof.gov.tl](mailto:aramos@mof.gov.tl) or [adcosta@mof.gov.tl](mailto:adcosta@mof.gov.tl) or [Uurodriques@mof.gov.tl](mailto:Uurodriques@mof.gov.tl) or [mofsoares@mof.gov.tl](mailto:mofsoares@mof.gov.tl)