

## TIN APPLICATION

## **FORM**

## **ENTERPRISE - DOMESTIC**

nterprise Name :	(Legal base: Under the sec. 48 of UNTAE		Trade Name:			
nterprise Type:	UNIPESSOAL LDA E.N.I.N. (SOLE TRADER)	LDA FOUNDATION	☐ BRANCH OF FOREIGN CON ☐ STATE OWNED ENTERPRISE		s.a coopera <sup>*</sup>	
Trading\Mailing <i>i</i>	Address:		Enterprise Contact Info	ormation :		
Country:			Email:			
District:			Phone:			
Sub-District	:		Fax No:			
Village:	For official correspondence !					
Street Name	e:					
ou cou mann				Email Add	dress	
Postcode: Preferred La	nguage of Correspondence		etun 🗌 Portuguese	☐ Email Add ☐ Mailing A ☐ English		
Postcode:  Preferred La  ECTION 2 - (			etun	☐ Mailing A		
Postcode: Preferred La	OWNER OF THIS EN	NTERPRISE		☐ Mailing A☐ English  * TIN:	ddress	
Postcode:  Preferred La  ECTION 2 - (	OWNER OF THIS EN	NTERPRISE  presentative living in Time		☐ Mailing A☐ English  * TIN:	ddress	
Postcode:  Preferred La  ECTION 2 - (	Important: at least one Director or Re	NTERPRISE  presentative living in Time  Leste:		☐ Mailing A☐ English  * TIN:	ddress	
Postcode:  Preferred La  ECTION 2 - (  Owner Name:  Name of Director	Important: at least one Director or Re or Representative in Timor-	presentative living in Time Leste: uuired):	nor-Leste must be designated as resp	☐ Mailing A☐ English  * TIN:	ddress	
Postcode:  Preferred La  ECTION 2 - (  Owner Name:  Name of Director  List of Ownersh	Important: at least one Director or Re or Representative in Timor-  * TIN (proof require)	presentative living in Time Leste: uired):  f this Enterprise	nor-Leste must be designated as resp	Mailing A  English  *TIN:	ddress s.	
Postcode:  Preferred La  ECTION 2 - (  Owner Name:  Name of Director	Important: at least one Director or Re or Representative in Timor-  * TIN (proof require)	presentative living in Time Leste: uuired):	nor-Leste must be designated as resp	☐ Mailing A☐ English  * TIN:	ddress	
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Postcode:  Preferred La  ECTION 2 - (  Owner Name:  Name of Director  List of Ownersh	Important: at least one Director or Re or Representative in Timor-  * TIN (proof require)	presentative living in Time Leste: uired):  f this Enterprise	nor-Leste must be designated as resp	Mailing A  English  *TIN:	ddress s.	
Postcode:  Preferred La  ECTION 2 - (  Owner Name:  Name of Director  List of Ownersh	Important: at least one Director or Re or Representative in Timor-  * TIN (proof require)	presentative living in Time Leste: uired):  f this Enterprise	nor-Leste must be designated as resp	Mailing A  English  *TIN:	ddress s.	

## **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?	□ No	☐ Yes						
2. How many employees will you have? 3. What is the expected gross income during the first 12		Non-resident:	; Resident:					
months of operations? 4. Will the enterprise be paying rent for land, buildings, or		USD If Yes, Please	provide					
apartments?	_ NO	─ Withholdee Ti						
5. Will the enterprise be paying for services/subcontracts to individuals or enterprises outside Timor-Leste?	□ No	Yes						
6. Will the enterprise be receiving royalties? 7. Will the enterprise provide construction and consulting	□ No	Yes						
services?  8. Will the enterprise provide air or sea transportation	□ No	☐ Yes						
services?  9. Will the enterprise be providing designate services?	□ No	Yes> If Yes,	Catering   Hotel   Bar					
,	140		Catering Hotel Bar  Restaurant Telecommunication					
SECTION 4 - SUPPORTING DOCUMENT								
Copy of the Articles of Company		List of Employee Citize	n and Non - Resident (TIN)					
Copy of Certidão Registo Comercial - CRC	List of Employee Citizen and Non - Resident (TIN)  Impotant: If Employee does not has a TIN, please fill up Individual form and submit with employment contract.							
Map location of each establishment		maividual form and Submit with	employment contract.					
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 quest of Timor-Leste as they apply to you. The <b>tax laws</b> and explanations are available of			ations. You are responsible to know the <b>tax laws</b>					
OFFICE USE ONLY								
Approved TIN Registered:								
Rejected Reason:								
☐ Dili ☐ Bau	cau 🗆 Bob	oonaro 🗆 RAEOA 🗎 Lautem 🗎	Viqueque   Manatuto  Aileu					
□ Suai □ Erm	era 🗏 Mal	liana 🗆 Ainaro 🗆 Bobonaro						
Official Name:		_Signature	Date:/					