

## TAX REGISTRATION

## FOR RESIDENT COMPANIES REGISTERING FOR TAX IN IRELAND

This form can be used to register a resident limited company and other bodies who are not represented by an Agent such as those listed at 5 below, Corporation Tax, for PAYE/PRSI (as an employer), VAT and/or Relevant Contracts Tax (RCT).

Agents acting on behalf of Companies which require registration for Corporation Tax, VAT, Employer's PAYE/PRSI and/or RCT should apply through www.ros.ie.

Individuals/Entities, other than companies and bodies listed at 5 below, requiring to register should complete Form TR1 or PAYE Employees taking up employment for the first time should register their job using the Jobs and Pensions service. To use this service the employee must first register for myaccount on www.revenue.ie.

ALL companies are required to make payments and returns by electronic means using ROS. Details on ROS and the returns and related tax liabilities that must be paid and filed electronically are available on **www.revenue.ie.** 

Complete this form in BLOCK LETTERS, \* denotes a required field, where given options insert  $\boxtimes$  in the box(es) as appropriate. When completed sign the declaration at the end of the form and return it to the Registration Unit appropriate to the address at which the business is carried on. A full list of Registration Units is at the end of this form.

Note: Without sufficient information your tax registration(s) may be delayed

Part A	General Details	
State the full name of the registered under the Com		
2. If trading under a busines	s name, state	
3. Business Address (including (Tax Adviser/Accountant address)		
Phone (inc. area code)	Webs	ite
Mobile No.	Email	
4. Registered Office Address  Phone (inc. area code)	s * (including Eircode)  Email	
5. Legal Format (⊠ the releva	nt box)	
Designated Activity Co	mpany, Private Limited Compa	nny Public Limited Company
Private Unlimited Com	pany Statutory Body	Co-Operative Society
6. Date company was registe 7. Companies Registration C		
8. When did the business or	activity commence?*	D D M M Y Y Y
9. To what date will annual a	ccounts be made up?*	D D M M Y Y Y
10. If you want your tax affai	rs to be dealt with in Irish, ⊠ the box	

## General Details

				_								
11.	If the company was registered for any tax	Corporation	Tax	Ĺ								
	in this country previously what reference numbers did it hold?	Employer (F	PAYE/PRSI)									
		Value Adde	d Tax									
		Relevant Co	ontracts Tax (RCT)									
12.	Type of business*				•		•					
	(a) Is the business mainly retail	n	nainly wholesale			ma	inly r	nanı	ufact	urin	9	
	building & construction	forestry/r	meat processing				serv	/ice a	and (	othe	r	
	(b) Describe the business conducted in as much de 'dairy farmer', 'textile manufacturer', 'property le 'shopkeeper', 'manufacturer', 'computers', 'cons need to complete Panel 27, page 4.	etting', 'investr	nent income', etc. [	Do n	ot us	e ger	neral	tern	าร รเ	uch	as	also
	(c) State the company's expected turnover in the ne	ext 12 months	<b>3</b>					€				
12	Please confirm if there is a software package in	uso within										
13.	the business, e.g. Accounting Package/EPOS sy											
	If yes, please provide the name of the software p	oackage(s)										
11	If the business will supply plastic bags to the cu	iotomor inco	rt ☑ in the hev *									
											l	
15.	Directors, give the following information in relat A minimum of two directors are required.	ion to each o	airector. It necessa	ary,	cont	inue	on a	sep	oara	ie s	nee	τ.
	Name Private Addre	ess	Shareholding				F	PSI	N			
			-	%								
					•	•				•		
			-	]%[								
				]%[								
16.	Company Secretary, if this is one of the director	s above the	name will suffice.*	·								
	Name Pri	ivate Address	S				F	PSI	N			
17.	Shareholders, give the details of any shareholde who has more than 15% or more beneficial inter			det	ails	are s	how	n ab	ove	)		
	Name Private Addre	ess	Shareholding				F	PSI	N			
			-	]%[								
18.	Adviser Details - give the following details of the coaccounts and tax returns of the company.	ompany's acco	ountant or tax advis	er, i	f any	, who	will	prep	are	the		
	Name											
	Address											
	Phone (inc. area code)		Email									
	Contact name for Advisor											

	Part A continued	General Details						
Tax	Adviser Identification Num	ber (TAIN) Mobile No.						
	ſ							
	Client's Reference  If correspondence relating to the following is being dealt with by the accountant or tax adviser ⊠ the relevant box							
11 C	correspondence relating to	the following is being dealt with by the accountant	or tax adviser & the relevant box					
	VAT (i.e. V	AT3's) RCT	Employer PAYE/PRSI					
19.	If you rent your business (i) Name and private addre (not an estate agent or	ess of the landlord						
	(ii) The amount of rent paid	l per week month year (	⊠ the frequency)    €					
	(iii) The date on which the	company started paying the rent	D D M M Y Y Y					
	(iv) The length of the agree	ed rental/lease period.						
	(v) Please submit a copy of	f the rental lease agreement.						
20.	If you acquired the busin  (i) The name and current from whom you acquire	•						
	(ii) The VAT/registered nun	iber of that person						
	Part B	Registration for Corporation T	Tax					
21.	If the company is registe	ring for Corporation tax ⊠ the box						
21.	If the company is register Part C	ring for Corporation tax ⊠ the box  Registration for VAT						
	Part C		art					
22.	Part C	Registration for VAT	art					
22.	Part C  If the company is registed Registration	Registration for VAT						
22.	Part C  If the company is registed Registration  (a) State the date from whomal (b) Is registration being some some series and the series are series as a series and the series are series as a series are series are series as a series are series as a series are series are series are series as a series are series as a series are series are series are series as a series are series	Registration for VAT  ring for VAT insert ⊠ in the box and complete this pa						
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22.	Part C  If the company is register  Registration  (a) State the date from who  (b) Is registration being some (This applies only to fail (c) Are you registering the	Registration for VAT  ring for VAT insert ☑ in the box and complete this pa  ich the company requires to register for VAT *  ught only in respect of European Union (EU) acquisitions riners and non-taxable entities) (insert ☑ the appropriate is company because: *  or is likely to exceed the limits prescribed by law						
22.	Part C  If the company is register  Registration  (a) State the date from who  (b) Is registration being some (This applies only to fail  (c) Are you registering the (i) turnover exceeds for registration? Of the company is registered.	Registration for VAT  wring for VAT insert ☑ in the box and complete this pation the company requires to register for VAT *  ught only in respect of European Union (EU) acquisitions from and non-taxable entities) (insert ☑ the appropriate to company because: *  or is likely to exceed the limits prescribed by law  r  o be a taxable person, (although not obliged by law	(i)					
22.	Part C  If the company is register  Registration  (a) State the date from who  (b) Is registration being som  (This applies only to fail  (c) Are you registering the  (i) turnover exceeds for registration? O  (ii) you wish to elect to be registered)?  (iii) you are in receipt of	Registration for VAT  wring for VAT insert ☑ in the box and complete this pation the company requires to register for VAT *  ught only in respect of European Union (EU) acquisitions from and non-taxable entities) (insert ☑ the appropriate to company because: *  or is likely to exceed the limits prescribed by law  r  o be a taxable person, (although not obliged by law	Yes No (ii) (iii) or (iii) as appropriate)					
22.	Part C  If the company is register  Registration  (a) State the date from who  (b) Is registration being son  (This applies only to fail  (c) Are you registering the  (i) turnover exceeds  for registration? O  (ii) you wish to elect to be registered)?  (iii) you are in receipt of to VAT applies? At	Registration for VAT  ring for VAT insert ☑ in the box and complete this pa  ich the company requires to register for VAT *  ught only in respect of European Union (EU) acquisitions rimers and non-taxable entities) (insert ☑ the appropriate to company because: *  or is likely to exceed the limits prescribed by law r  to be a taxable person, (although not obliged by law Or  of business to business services where the reverse charge tach a copy of the invoice if this is the case.  cash receipts basis of accounting for	Property of the control of the cont					
22.	Part C  If the company is register  Registration  (a) State the date from who  (b) Is registration being some (This applies only to fail (c) Are you registering the (i) turnover exceeds for registration? Outlies (ii) you wish to elect to be registered)?  (iii) you are in receipt of to VAT applies? At Are you applying for the	Registration for VAT  wring for VAT insert ☑ in the box and complete this pation in the company requires to register for VAT *  ught only in respect of European Union (EU) acquisitions of the mers and non-taxable entities) (insert ☑ the appropriate is company because: *  or is likely to exceed the limits prescribed by law or  to be a taxable person, (although not obliged by law or  of business to business services where the reverse charge that a copy of the invoice if this is the case.  cash receipts basis of accounting for sert ☒ the appropriate box)	Property of the second of the					
22.	Part C  If the company is register  Registration  (a) State the date from who  (b) Is registration being son  (This applies only to fail  (c) Are you registering the  (i) turnover exceeds  for registration? O  (ii) you wish to elect to be registered)?  (iii) you are in receipt of to VAT applies? And  Are you applying for the goods and services? (insertions).	Registration for VAT  wring for VAT insert ☑ in the box and complete this pation in the company requires to register for VAT *  ught only in respect of European Union (EU) acquisitions of the mers and non-taxable entities) (insert ☑ the appropriate is company because: *  or is likely to exceed the limits prescribed by law or  to be a taxable person, (although not obliged by law or  of business to business services where the reverse charge that a copy of the invoice if this is the case.  cash receipts basis of accounting for sert ☒ the appropriate box)	D D M M Y Y Y Y   Y   Y   Y   Y   Y   Y   Y					
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## Registration for VAT

26. State your bank or building society account to which refunds can be made:

Branch Address						
Didnot Address						
IBAN (Max. 34 characters)	$\overline{\Box}$					
BIC (Max. 11 characters)						
27. Developer/Landlord - Property details for VAT purposes						
(a) Address of the property						
(b) Date purchased or when development commenced	Υ					
(c) Planning permission reference number, if applicable						
(d) Attach a copy of the minutes of the meeting or signed statement*, where it was resolved that the property in question would be purchased and/or developed and would be disposed of or used in a manner which would give rise to a VAT liability, e.g. by sale of the property or by exercising the Landlord's 'option to tax'.						
* The minutes should show the date of the meeting, the names of all those present at the meeting and should be signed by the company secretary or precedent acting partner in the case of a partnership.						
The statement should be signed by the company secretary or director						
Part D Registration as an Employer for PAYE/PRSI						
28. If you are registering as an employer for PAYE/PRSI ⊠ the box and complete this part						
29. Persons Engaged						
(a) How many <b>employees</b> are: <b>Full time</b> - usually working 30 hours or more per week?	T					
Part time - usually working less than 30 hours per week?						
rait time - usually working less than 30 nours per week!						
(b) State the date your first employee commenced or will commence in your employment *	Υ					
(b) State the date your first employee commenced or will commence in	Y					
(b) State the date your first employee commenced or will commence in your employment *						
(b) State the date your first employee commenced or will commence in your employment *  30. What payroll and PAYE/PRSI record system will you use? (⋈ the relevant box)  (a) Computer System    If you are using a computerised payroll package you should register for the Reve On-Line service (ROS) at www.revenue.ie to receive electronic copies of Tax Cre						
(b) State the date your first employee commenced or will commence in your employment *  30. What payroll and PAYE/PRSI record system will you use? (⋈ the relevant box)  (a) Computer System						
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(b) State the date your first employee commenced or will commence in your employment *  30. What payroll and PAYE/PRSI record system will you use? (⊠ the relevant box)  (a) Computer System						
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(b) State the date your first employee commenced or will commence in your employment *  30. What payroll and PAYE/PRSI record system will you use? (⊠ the relevant box)  (a) Computer System						

(Individual, secretary, precedent partner, trustee, etc.)

Note that Principal Contractors are obliged to use Revenue's Online Service to fulfill their RCT obligations. Principal Contractors are obliged to register and account for VAT in relation to Construction Services under the VAT Reverse Charge rules. Please refer to Part C of this form, Registration for VAT. Detailed information on RCT and VAT, including guides on Principal Contractor obligations, is available on the Revenue website www.revenue.ie

32. Are you applying to registe	r as a (⊠ the relevant box): *	
(a) Principal only	(b) Principal & Subcontractor	(c) Subcontractor only
If (a) or (b) applies pleas	se provide the number of subcontractors engaged.	
33. Date of commencement for	RCT *	
an agent willing to carry ou	actor have you registered for ROS, or have you It all RCT functions who is registered for ROS? ification Number (TAIN) of your agent, if applicable	Yes No
35. Have you previously registe	ered with Revenue as a Principal?	Yes No
36. If so, state the date you last	t ceased to be a Principal	D D M M Y Y Y
Declaration	This must be made in every case before you can be	be registered for any tax
I declare that the particulars su	upplied by me in this application are true in every respons	ect
NAME*	SIGNATURE*	
CAPACITY*	DCK LETTERS)  DATE*	MYYYY

If you require further information on taxation in Ireland, please visit www.revenue.ie. Save time by filing on-line using our **Revenue Online Service** (**ROS**). This is a self-service, internet facility which provides customers with a quick and secure facility to manage their tax affairs online 24/7, 365 days a year. Please note that certain categories of taxpayers in Ireland are required to pay and file their tax returns on line. See more on **Mandatory e-filing** on our website.

Please submit this form to the Registration Unit appropriate to the Business Address: (not tax adviser/accountant's address)

Business address	Registration Unit	Contact Details
No Physical Presence in the State	Dublin Registrations Unit 9/15 Upper O'Connell Street Dublin 1 D01 F9C1	eMail: citycentrenorthcityreg@revenue.ie Tel: + 353 1 702 3056
Clare, Cork, Kerry, Limerick	South West Registrations Unit PO Box 327 Churchfield Cork	eMail: swregistrations@revenue.ie Tel: 1890 368 378
Cavan, Donegal, Galway, Leitrim, Longford, Louth, Mayo, Monaghan, Offaly, Roscommon, Sligo, Westmeath	Border Midlands West Registrations Unit Geata Na Cathrach Fairgreen Galway H91 W26K	eMail: bmwregistrations@revenue.ie Tel: 1890 216 216
Carlow, Kildare, Kilkenny, Laois, Meath, Tipperary, Waterford, Wexford, Wicklow	East & South East Region Central Registrations Government Offices Stradavoher Thurles Co. Tipperary E41 HE16	eMail: esereg@revenue.ie Tel: 1890 240 424
Dublin Region City and County	Dublin Registrations Unit 9/15 Upper O'Connell Street Dublin 1 D01 F9C1	eMail: citycentrenorthcityreg@revenue.ie Tel: 1890 236 336
Associates of existing LCD customers and companies involved in;  a) Aircraft Leasing b) Insurance/ Re-insurance c) ICAV's (authorised funds)	Large Cases Division Registrations Unit Ballaugh House 73/79 Lower Mount Street Dublin 2 D02 PX37	eMail: lcdregistrations@revenue.ie Tel: 1890 605 090 International callers + 353 1 702 3084

