**TIN Registration Application Form**

**Taxpayer Identification Number (TIN) Registration Form
Section 1: Personal or Business Information**

* **Full Name / Business Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**
* **Date of Birth / Business Registration Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**
* **Gender (if individual): ☐ Male ☐ Female ☐ Other**
* **Nationality: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**
* **Taxpayer Category: ☐ Individual ☐ Sole Proprietor ☐ Partnership ☐ Corporation ☐ NGO**

### **Section 2: Contact Information**

* **Residential / Business Address: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**
* **City: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**
* **State/Province: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**
* **Postal Code: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**
* **Phone Number: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**
* **Email Address: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

### **Section 3: Identification Documents**

| **Document Type** | **Document Number** | **Issuing Authority** | **Expiration Date** |
| --- | --- | --- | --- |
| **Passport** |  |  |  |
| **National ID** |  |  |  |
| **Driver’s License** |  |  |  |
| **Business Certificate** |  |  |  |
| **Other** |  |  |  |

### **Section 4: Business Information (For Business Applicants Only)**

* **Business Type: ☐ Sole Proprietorship ☐ Partnership ☐ Corporation**
* **Nature of Business: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**
* **Business Registration Number: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**
* **Date of Business Incorporation: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

### **Section 5: Declaration & Signature**

**I, (Full Name), confirm that the information provided is accurate.**

**☐ I agree to comply with tax laws and regulations.**

**Applicant’s Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**