

APPLICATION FOR TAX RESIDENCY CERTIFICATE

SECTION A: APPLICANT DETAILS			Legal Entities		
1. Tax Identification Number					
2. Entity Name					
3. Registration Number					
4. Physical Address in Namibia					
5. Postal Address					
6. Full name of contact person		Contact Number	er		
		Email Address			
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SECTION B: TAX RESIDENCE INFO	RMATION				
7. Is the entity incorporated in Namibia?			YES	NO	
• if no, state the country of incorporation					
8. Was a Tax Residency Certificate previously issued: I	f yes, indicate the tax peri	od(s)	YES	NO	
	Tax period(s)				
9. Purpose of applying for a Tax Residency Certificate					
10. Tax period(s) for which the Tax Residency Certifica	ate is required				
11. Indicate the tax treaty country for which the Tax Re	esidency Certificate is requ	uired:			
Botswana France	Germany	India	Malaysia	Mauritius	
Romania Russia	South Africa	Sweden	United Kingdom	1	
12. If the Tax Residency Certificate is for a country not listed above or if it is not required for a specific country, tick and/or complete the					
relevant fields below:					
Other Country Name of Country			Generic Certifica	ate	
					_
SECTION C: DECLARATION					
14. I declare that the information furnished in this form	n and attached hereto is c	omplete, true and	correct.		
Signature of Applicant	D D M M	Y Y Y Y			
		ATORY DOCUMENTS			
NB: AN APPLICATION FOR TAX RESIDENCY CERTIFICATE V REJECTED IN THE FOLLOWING INSTANCES:	WILL BE a) Certified of	a) Certified copies of entity's registration documents.			
The applicant is not registered for income tax purposes in the property of the property o	b) Supportin	b) Supporting documents for obtaining Tax Residency Certificate			

c) Power of Attorney if the application is being submitted by a

representative on behalf of the taxpayer.

The application form is incomplete.

The applicant's tax affairs are not in order.

The mandatory documents are not submitted.