



3-00/01

MALAWI REVENUE AUTHORITY**Application for Registration for Income Tax and Value Added Tax (Business)**

The completed form should be hand delivered to your
Income Tax Office or send to the Regional Income
Tax office below:

For official use only

Regional Manager (South),
PO Box 94,
Blantyre,
MALAWI

Regional Manager (Central),
Private Bag 26,
Lilongwe,
MALAWI

Regional Manager (North),
Private Bag 15,
Mzuzu,
MALAWI

TPIN

Captured By

Verified By

Date of receipt

Application checked by

Date Captured

Date Verified

All information to be completed fully and in Block Letters. Make a cross (X) in the relevant box where requested.

1.00 Name of the business to be registered

2.00 Trading Name

3.00 Business Registration Number

4.00 Business Registration Date

5.00 Primary nature of business

6.00 Type of business to be registered (mark box)

Limited Company

Sole
Proprietorship

Partnership

Club

Ecclesiastical
Body

6.01 If other, specify:

7.00 Commencement date

8.00 Head Office Physical Address, Region/Country

8.01 Town/City/District

8.02 Township/Trading Centre

8.03 Zone/Village

8.04 Plot no

8.05 Street Name

8.06 Provide the Landlord details, if the above property is being rented:

8.07 Landlord Name

8.08 TPIN

8.09 Landlord Address, Region/Country

8.10 Town/City/District

8.11 Township/Trading Centre

8.12 Zone/Village

8.13 Plot no _____ 8.14 Street Name _____

9.00 Head Office Postal Address, Region/Country _____

9.01 Town/City/District _____ 9.02 Township/Trading Centre _____

9.03 Zone/Village _____ 9.04 Post office box no _____

10.00 Business Telephone Number _____ 10.01 Fax Number _____

11.00 Name of person making application _____ 11.01 TPIN _____

11.02 Position (mark box)

Proprietor	Partner	Director	Company Secretary	Authorised Officer
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11.03 Contact Number _____

12.00 Officials

	Official Type	TPIN	Name	Date Appointed	Share Percentage
12.01					
12.02					
12.03					
12.04					
12.05					
12.06					

13.00 Banking Details

	Bank Name	Branch	Account Number	Account Type	Account Holder
13.01					
13.02					
13.03					
13.04					

14.00 Tax types the business is to be registered for (mark box)

PAYE	WHT	FBT	VAT

14.01 For each tax type selected, provide the start date

15.00 Total capital investment _____

15.01 Source of capital investment _____

16.00 Annual turnover of taxable supplies:

16.01 Actual turnover in the past twelve months _____

16.02 Expected turnover in the next twelve months _____

16.03 If the figures above are less than K2,000,000, provide the actual turnover for the past four quarters:

16.04	Quarter Ending:				
16.05	Turnover:				

17.00 What is the last month of the accounting year for the business? _____

18.00 Branch details (If applicable. If more than one branch, provide additional information on copies of this page)

18.01 Details for Branch ____ , Branch Name _____											
18.02 Branch Physical Address, Region/Country _____											
18.03 Town/City/District _____		18.04 Township/Trading Centre _____									
18.05 Zone/Village _____											
18.06 Plot no _____		18.07 Street Name _____									
18.08 Provide the Landlord details, if the above property is being rented:											
18.09 Landlord Name _____		18.10 TPIN _____									
18.11 Landlord Address, Region/Country _____											
18.12 Town/City/District _____		18.13 Township/Trading Centre _____									
18.14 Zone/Village _____											
18.15 Plot no _____		18.16 Street Name _____									
18.17 Branch Postal Address, Region/Country _____											
18.18 Town/City/District _____		18.19 Township/Trading Centre _____									
18.20 Zone/Village _____		18.21 Post office box no _____									
18.22 Business Telephone Number _____		18.23 Fax Number _____									
18.24 Name of Contact Person _____		18.25 TPIN _____									
18.26 Tax types the branch is to be registered for (mark box)		<table border="1" style="width: 100%; border-collapse: collapse; text-align: center;"> <tr> <td style="width: 25%;">PAYE</td> <td style="width: 25%;">WHT</td> <td style="width: 25%;">FBT</td> <td style="width: 25%;">VAT</td> </tr> <tr> <td style="height: 20px;"></td> <td></td> <td></td> <td></td> </tr> </table>		PAYE	WHT	FBT	VAT				
PAYE	WHT	FBT	VAT								
18.27 For each tax type selected, provide the start date											

19.00 With which other registration authorities is this business registered? _____

20.00 Declaration and Application

I, _____

a) hereby declare that the particulars and statements given in this form and accompanying correspondence are true and complete

b) hereby apply for registration under the provisions of the Taxation Act (Cap 41:01)

Signed _____ Date _____

Notes and Clarifications

- 1.00 The registered name of the business e.g. Calsberg, Coca-Cola
- 2.00 The trading name under which the business operates e.g. Calsberg Blantyre, Coca-Cola Malawi
- 5.00 The primary source of income
- 8.00 The physical address of the business, place of business
- 12.00 The officials of the business, e.g. Owner, CEO, Shareholders, Partners, etc