



FORM P.4

**MALAWI REVENUE AUTHORITY  
DOMESTIC TAX DIVISION  
REGISTRATION OF EMPLOYEE**

**EMPLOYEE DETAILS**

ETIN(if any):

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SURNAME..... INITIALS: .....

OTHER NAMES.....

DATE OF BIRTH.....

POSTAL ADDRESS.....

HOME ADDRESS:

V/G.....T/A.....DISTRICT:.....

MARITAL STATUS..... CAPACITY EMPLOYED.....

**EMPLOYMENT DETAILS**

GROSS SALARY: .....

DATE OF APPOINTMENT.....

OTHER CASH BENEFITS.....

**EMPLOYER DETAILS**

TPIN: 

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NAME OF EMPLOYER.....

POSTAL ADDRESS.....

TELEPHONE NO:..... CELL NO.....

E-MAIL.....

I declare that the information given above is correct and complete.

**Date**.....

**Employer/Employer's Representative**