



Federal Board of Revenue Taxpayer Registration Form

TRF-01 (V-2)

Note : Please follow the instructions printed overleaf while completing this form and attach all the required documents for expeditious processing of your application.

1	Sheet No. <input type="text"/> of <input type="text"/>	Current NTN (if already issued) <input style="width: 100%;" type="text"/>	Token No. N° <input style="width: 100%;" type="text"/>																						
2	Applying For <input type="checkbox"/> New Registration (for Income Tax, Sales Tax, Federal Excise) <input type="checkbox"/> Change in Particulars <input type="checkbox"/> Sales Tax or FED Registration, who already have NTN <input type="checkbox"/> Duplicate Certificate																								
3	CPR number (for Rs. 1000), for Duplicate Certificate <input style="width: 100%;" type="text"/>																								
3	Category <input type="checkbox"/> Individual <input type="checkbox"/> AOP <input type="checkbox"/> Company																								
<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 20%;">Individual Type</td> <td><input type="checkbox"/> Salaried</td> <td><input type="checkbox"/> Business</td> <td><input type="checkbox"/> Other (please specify) _____</td> </tr> <tr> <td>AOP Type =></td> <td><input type="checkbox"/> HUF</td> <td><input type="checkbox"/> Firm</td> <td><input type="checkbox"/> Artificial Juridical Person</td> <td><input type="checkbox"/> Body of persons formed under a foreign law</td> </tr> <tr> <td>Company Type</td> <td><input type="checkbox"/> Pvt. Ltd.</td> <td><input type="checkbox"/> Public Ltd.</td> <td><input type="checkbox"/> Small Company</td> <td><input type="checkbox"/> Trust</td> <td><input type="checkbox"/> Unit Trust</td> <td><input type="checkbox"/> Modarba</td> </tr> <tr> <td></td> <td><input type="checkbox"/> NGO</td> <td><input type="checkbox"/> Society</td> <td colspan="3"><input type="checkbox"/> Any other (pl specify) _____</td> </tr> </table>				Individual Type	<input type="checkbox"/> Salaried	<input type="checkbox"/> Business	<input type="checkbox"/> Other (please specify) _____	AOP Type =>	<input type="checkbox"/> HUF	<input type="checkbox"/> Firm	<input type="checkbox"/> Artificial Juridical Person	<input type="checkbox"/> Body of persons formed under a foreign law	Company Type	<input type="checkbox"/> Pvt. Ltd.	<input type="checkbox"/> Public Ltd.	<input type="checkbox"/> Small Company	<input type="checkbox"/> Trust	<input type="checkbox"/> Unit Trust	<input type="checkbox"/> Modarba		<input type="checkbox"/> NGO	<input type="checkbox"/> Society	<input type="checkbox"/> Any other (pl specify) _____		
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	<input type="checkbox"/> NGO	<input type="checkbox"/> Society	<input type="checkbox"/> Any other (pl specify) _____																						
4	Status <input type="checkbox"/> Resident <input type="checkbox"/> Non-Resident Country of Non Resident _____																								
5	CNIC/PP No. _____ [for Individual only, Non-Residents to write Passport No.]		Gender <input type="checkbox"/> Male <input type="checkbox"/> Female																						
6	Reg/ Inc. No. _____ [for Company & Registered AOP only]		Birth/ Inc. Date _____																						
7	Name _____		Trade Name _____																						
8	Address Registered Office Address for Company and Mailing/Business Address for Individual & AOP, for all correspondence																								
<table style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 25%;">Office/Shop/House /Flat /Plot No</td> <td style="width: 45%;">Street/ Lane/ Plaza/ Floor/ Village</td> <td style="width: 30%;">Block/ Mohala/ Sector/ Road/ Post Office/ etc</td> </tr> <tr> <td>Province</td> <td>District</td> <td>City/Tehsil</td> </tr> <tr> <td>Area</td> <td>Code</td> <td>Number</td> </tr> </table>				Office/Shop/House /Flat /Plot No	Street/ Lane/ Plaza/ Floor/ Village	Block/ Mohala/ Sector/ Road/ Post Office/ etc	Province	District	City/Tehsil	Area	Code	Number													
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Province	District	City/Tehsil																							
Area	Code	Number																							
9	PTCL No. Area Code _____ Number _____ <input type="checkbox"/> In applicant's name <input type="checkbox"/> In other's name <input type="checkbox"/> Wireless <input type="checkbox"/> Landline																								
10	Mobile Area Code _____ Number _____ <input type="checkbox"/> In applicant's name <input type="checkbox"/> In other's name <input type="checkbox"/> Post paid <input type="checkbox"/> Prepaid																								
11	E-Mail _____		Fax _____																						
(e-Mail address for all correspondence)																									
12	Principal Activity _____																								
13	Business Nature (IT, ST) <input type="checkbox"/> Manufacturer <input type="checkbox"/> Importer <input type="checkbox"/> Exporter <input type="checkbox"/> Wholesaler (including Dealer) <input type="checkbox"/> Distributor <input type="checkbox"/> Retailer <input type="checkbox"/> Service Provider <input type="checkbox"/> Others																								
14	Register for <input type="checkbox"/> Income Tax <input type="checkbox"/> Sales Tax <input type="checkbox"/> Federal Excise Paid up capital Rs. _____ Working Capital Rs. _____																								
15	Rep. Type <input type="checkbox"/> Rep.u/s 172 <input type="checkbox"/> Authorized Rep. u/s 223 in capacity as <input type="checkbox"/> Self																								
16	CNIC/ NTN _____ Name _____																								
17	Address Office/Shop/House /Flat /Plot No _____ Street/ Lane/ Plaza/ Floor/ Village _____ Block/ Mohala/ Sector/ Road/ Post Office/ etc _____																								
Province _____ District _____ City/Tehsil _____ Area/Town _____																									
18	PTCL No. Area Code _____ Number _____ <input type="checkbox"/> In Representative's name <input type="checkbox"/> In other's name <input type="checkbox"/> Wireless <input type="checkbox"/> Landline																								
19	Mobile Area Code _____ Number _____ <input type="checkbox"/> In Representative's name <input type="checkbox"/> In other's name <input type="checkbox"/> Post paid <input type="checkbox"/> Prepaid																								
20	E-Mail _____		Fax _____																						
(e-Mail address for all correspondence)																									
21	Total Director / Shareholder / Partner _____																								
<i>Please provide information of all Directors/Partners and top-10 Shareholders</i>																									
22	Type P, S	NTN/CNIC/ Passport No.	Name of Director/Shareholder/Partner																						
		Share Capital	Share %																						
		Action (Add/ Remove)																							
23	All Other Shareholders/ Directors/Partners (in addition to 10)																								

Registry

Representative/ Authorized Rep.

Director/Shareholder/Partner



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Other Activities section (row 24) with columns for Activity Code, description, and Action (Add/Close).

HS Codes section (row 25) with columns for Activity Code, HS Code, and HS Description.

Business/Branches section (rows 26-34) including total business/branches, details for each branch (serial, type, address, possession, etc.), and start/close dates.

Bank Accounts section (rows 35-39) including total bank accounts, details for each account (Sr., No., Name, City, Branch, Start Date, etc.), and primary account status.

Employer section (rows 40-41) including NTN/FTN, Name, and Address.

Declaration section (row 42) with a declaration statement, signature box, thumb impression box, and fields for Date, CNIC/Passport No., and Name of Applicant.

Government of Pakistan
Federal Board of Revenue
Taxpayer Registration Form

FILLING INSTRUCTIONS

Application Submission Modes	<p>Tax Registration Form can be submitted as follows:</p> <p>1) Duly completed application form along with copies of required documents can be submitted at any of the Regional Tax Office or TFCs.</p> <p>2) Online application can also be prepared by accessing the FBR website https://e.fbr.gov.pk. Online tutorial for assistance can also be downloaded. If online application is submitted, then Printed Application duly signed by along with all the required documents should be sent by Courier at following address: Manager (Taxpayer Registration), PRAL Office, Third Floor, Software Technology Park III, I-9, Islamabad.</p> <p>3) NTN Certificate should be received in person at RTO by the applicant or his authorized representative, after one working day of successful telephonic verification. At the time of receiving the Certificate, Original CNIC should be shown. If an authorized representative is to receive the NTN Certificate then Original Authority Letter and original CNIC of the authorized person should be shown at the RTO/ TFC Counter.</p> <p>4) In case of Taxpayer is registered for Sales Tax as well, then the Certificate will be delivered by the Authorized Officer of RTO concerned to the applicant in person.</p> <p>5) Request for Change in Particulars is also processed on the same form, no NOC from the RTO/LTU is required</p> <p>6) For Request of Duplicate Certificate, complete particulars should be provided. Current Certificate should be surrendered, if available. A CPR for Rs. 1,000 should be attached as fee for issuance of Duplicate Certificate.</p>
Documents to be attached	<p>Attachments for ALL APPLICATIONS : 1) Copy of CNIC/Passport of Applicant, 2) Copy of the Electricity Bill of the connection installed at the address given in the Registry Portion of TRF-01, 3) Copy of CNIC of Owner of business premises, if the premises is not self owned along with copy of rent/lease agreement</p> <p>INDIVIDUAL</p> <p>A. Salaried Persons 1) Copy of CNIC/ Passport of Individual, 2) Salary Slip or Employment Letter (for new employees)</p> <p>B. Business Persons 1) Copy of CNIC/ Passport of Individual 2) One Page of Business Letter Head Pad (crossed as X), 3) Bank Account Certificate issued by the bank for the account maintained in the name of the business, if applying for ST Registration</p> <p>C. Other Individual 1) Copy of CNIC/ Passport of Individual, 2) Single page declaration stating the purpose of Registration with documentary evidence(s)</p> <p>Note:-</p> <p>AOP 1) Copy of CNIC of Applicant, 2) Attested Copy of AOP Agreement, if applicable, 3) Applications of all Partners, if not already NTN holder</p> <p>Company 1) Copy of SECP Incorporation Certificate, 2) Form-III/Form-A submitted to SECP, 3) Applications of all Owners/Directors if not already NTN holder, 4) Company's Bank Account Certificate, 5) Statement of Affairs 6) Bank Statement 7) For quick STRN Issuance, Download GVS FBR Mobile Application from Google Store and send electronic image of Manufacturing Unit, Business Premises, Electricity and Gas Meter.</p> <p>For NR Company not having Permanent Existence in Pakistan a) Incorporation Certificate of the Company in the Country of Non-Resident, 2) Copy of CNIC of Authorized Rep.</p>
Registry	<p>1 Sheet No. Usually only one sheet of this form is sufficient. However more sheets will be needed in case of more than 1-Businesses/Branches, more than 5-Business Activities or more than 1-Bank Accounts. For example, if 2-more sheets are attached then the first will have Sheet 1 of 3, and so on upto Sheet 3 of 3. If no sheet is attached, then write Sheet 1 of 1.</p> <p><i>Current NTN</i> Write current NTN, if already issued. This is mandatory for issuance of Duplicate Certificate, Change in Particulars and application for ST/FE where NTN is already issued</p> <p><i>Token N°</i> This field is for official use. All the grey fields are for official use and should be left blank by the applicant.</p> <p>2 Application Type Tick (✓) the relevant box. If the box for change in particulars is selected the current NTN should also be provided. Grey box is for check digit. If a person has already obtained NTN and now wants to apply for ST/ FED, he should tick (✓) Apply for ST / FED Registration</p> <p>3 Category Check (✓) the relevant box showing the Person Category as Company, AOP or Individual. If Category is selected as Company or AOP then one of the types of Company/AOP should also be checked (✓).</p> <p>4 Status Check the Status as Resident or Non-Resident. In case of Non-Resident the Country of Non-Resident Person should also be written.</p> <p>5 CNIC/ PP No. All Resident Individuals should write CNIC Number and Non-Resident Individuals should write Passport (PP) Number in this column.</p> <p>In case of Company and AOP this column should be left blank.</p> <p><i>Gender</i> Gender is required only for Individual, for Company and AOP it should be left blank</p> <p>6 Reg./ Inc. No. In case of Company, write SECP incorporation number. In case of AOP write the registration number of AOP if available, otherwise leave it blank.</p> <p><i>Birth/ Inc. Date</i> Individual should write the Birth Date and Company/AOP should write the date of incorporation/formation</p> <p>7 Name Name of Registered Person. Individual should write the name as appearing in the CNIC/ Passport, Company should write the name as appearing in SECP and AOP should write the name as shown in the AOP Agreement.</p> <p><i>Trade Name</i> "Trade Name" is an optional column which means that the name under which the business or operation is conducted and presented to the world is not the legal name of the legal person (or persons) who actually own it and are responsible for it.</p> <p>8 Address Company should write the address of Registered Office, Individual and AOP should write Business/Mailing Address.</p> <p>9 Principal Activity Principal Activity of the Person being registered should be written here, in case of multiple business activities the Principal Activity at the time of registration should be determined on the basis of major revenue generating business activity. Detailed list of Business Activities can be accessed from FBR's web site http://fbr.gov.pk or https://e.fbr.gov.pk. Individuals having only salary income should write Salary Income as Principal Activity. Professionals should specify their profession as Principal Activity or Other Activity as the case may be.</p> <p><i>Activity Code</i> Activity Code is for official use, applicant should leave it blank.</p> <p># Business Nature (IT, ST) Select the nature of business, More than one nature of business can also be selected.</p> <p># Register for Tick (✓) the relevant boxes. All the relevant boxes should be checked.</p> <p><i>Paid Up Capital, Working Capital</i> Paid up and Working Capital Investment is mandatory, for all applicants other than Salaried Individual and Other Individual</p>
Representative/ Auto-Rep	<p># Rep. Type "Representative as defined u/s 172" or "Authorized Representative in case of Company not having Permanent Establishment in Pakistan, as defined u/s 223" of the Income Tax Ordinance 2001.</p> <p><i>In Capacity as</i> Capacity in which Representative/ Authorized Representative is mentioned as defined u/s 172 or 223(2) of Income Tax Ord. 2001</p> <p># CNIC/ NTN, Name Mention Representative's CNIC/NTN and Name.</p> <p># Address Mention Representative's address</p> <p># Phone Phone of the Legal Representative or Individual (in case of Self) should also be written. Also select whether PTCL is in owner's or other's name and it has Wireless or Landline number.</p> <p># Mobile Mobile number of the Legal Representative or Individual (in case of Self) should also be written. Also select whether Mobile is in owner's or other's name and it has Prepaid or Post paid connection.</p> <p># E-Mail, Fax E-Mail address of the legal representative should be written here, which will be used to serve legal notices and correspondence, Fax number is optional.</p>
Directors/ Partners/ Shareholders	<p># Total No. of Directors Total Number of directors/shareholders/partners of the business.</p> <p># Type of Identification Type of Identification: N=> NTN, C=> CNIC, P=> Passport Number, M=> CNIC number issued in Form-B by NADRA in case of Minors NTN/ CNIC of all the shareholders/ directors/ partners should be provided in this portion. More sheets should be added for more than 5.</p> <p><i>Name of Director</i> Name of Director/Shareholder/Partner.</p> <p><i>Capital Share %</i> Capital share of owner in terms of capital amount, for Company only %age of share will be calculated by the system on the basis of share value provided in the capital column</p>

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FILLING INSTRUCTIONS

D/S

Others

Government of Pakistan
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FILLING INSTRUCTIONS

Other Activities	# Activity Code	Activity Code is for official use, applicant should leave it blank.		
	Business Activity	Detailed list of Business Activities can be accessed from FBR's web at site http://fbr.gov.pk or http://e.fbr.gov.pk . Do not re-write the Principal Activity given at Sr-9. Hence if there is no activity other than the Principal Activity, then this portion should be left blank. More activities can be added later through the Change Request as explained at Sr-2 above.		
HS Code	# Activity	Mention business activity as mentioned in Business Activity		
	HS Code	Activity Code is for official use, applicant should leave it blank.		
	HS Description	Specify the HS description		
Businesses/ Branches	# Total Business/branches:	Total Number of Businesses/ Branches, details of which should be provided in the following columns.		
	# Business / Branch Sr.	Serial Number of the Business/ Branch. Separate sheets are required to provide information about each additional business/ branch including HQ		
	Action Requested	Check (✓) the relevant box as Add Business, Change Particulars or Close Business/ Branch		
	Is it sales taxable business	Check (✓) the relevant box		
	# Business/Branch Type	Type of Business/ Branch such as Head Office, Sub-Office, Factory, Show Room, Godown, Sub Office, Outlet, etc		
	Business/ Branch Name	Write name of the Business or Branch in accordance with the Business Branch Type selected		
	# Address	Mention Address of Business type.		
	# Phone No.	Phone number with area code should be written for the Business/ Branch written at Sr. 20		
	# Nature of Premises	Nature of Premises Possession as Owned, Rented or Others, along with CNIC/NTN/FTN and Name of the Owner should be written		
	# Electricity Reference No.	Tick the relevant box if connection installed or not. Electricity Consumer number of the connection installed at the business/ HQ/ branch premises. Choose the Connection type as Commercial or industrial. Mention Commercial Reference No of meter if you are a manufacturer. Also mention if connection is installed at		
# Gas Consumer No.	Tick the relevant box if connection installed or not. Gas Consumer number of the connection installed at the business/ HQ/ branch premises. Choose the Connection type as Commercial or industrial. Also mention if connection is installed at Applicant name or any other name.			
# Business/Br. Start Date	Start Date of the Business/ Branch, date should be written in the format of DD-MM-YYYY.			
Business/Br. Close Date	Closing Date of the Business/ Branch. This is applicable only when Close Business/ Branch is selected as Action Requested			
Bank Accounts	# Total Bank Accounts	Total Number of Bank Accounts, details of which should be provided in the following columns		
	# Account Sr.	Serial Number of the Bank Account. Separate sheets are required to provide information about each additional bank account		
	Action Requested	Check (✓) the relevant box as Add Account, Change Particulars or Close Account		
	Is it Primary Account	Check (✓) the relevant box, The primary account will be used for crediting refund payments		
	# A/C No.	Bank Account No. as allotted by the bank		
	A/C Title	Title of Account		
	Type	Check (✓) the relevant box showing Account Type such as PLS or Current as the case may be.		
	# Bank Name	Write bank name in abbreviated form, e.g. MCB for Muslim Commercial Bank, NBP for National Bank of Pakistan, City Bank for City Bank		
	City	Name of the City in which bank branch is located		
	Branch	Name of the bank branch with branch Code		
# Start Date	Start Date of the bank Account, date should be written in the format of DD-MM-YYYY.			
Close Date	Close Date of the bank Account, in case the account is closed. This is applicable only when Close Account is selected as Action Requested			
Employer	# NTN/ FTN	NTN/ FTN of the Employer, in case of applicant having Salary Income as Principal Activity. (FTN = Free Tax Numbers allotted to Govt. Departments)		
	Name	Name of Employer		
	# Address	Address of Employer		
	City	City of Employer's Head Office		
Declaration	# Declaration	Declaration to be signed by the applicant or his/her authorized representative.		
	# Date	Date of signing the application, in the format of DD-MM-YYYY.		
	CNIC/Passport No.	CNIC/Passport No. of the applicant. Applicant can be the Person him/her self or his/her authorized representative having written Authorization.		
	Name of Applicant	Name of Applicant as appearing in the CNIC/Passport.		
	Signatures	Signatures of the applicant. The persons whose CNIC/Passport bear thumb impression should also put thumb impression here in lieu of signature.		
	Thumb Impression	Left hand thumb impression of male and right hand thumb impression of fe-male applicants in Black Ink		
RTO/ TFC	01) RTO Karachi, Opposite Sindh Secretariat	05) RTO Rawalpindi, Kachery Road	09) RTO Hyderabad, Site Area	13) RTO Islamabad
	02) RTO Lahore, Nabah Road	06) RTO Gujranwala, GT Road	10) RTO Sukkur, Income Tax Building	14) RTO Sargodha
	03) RTO Peshawar, Jamrud Road	07) RTO Sialkot, Kachary Road	11) RTO Multan, Shamsabad Colony	15) RTO, Bhawalpur
	04) RTO Quetta, Chaman Housing Scheme	08) RTO Faisalabad, New Civil Lines	12) RTO Abbottabad, Main Mansehra Road	