

APPLICATION FOR REGISTRATION AS A TAXPAYER OR
SUPPLEMENTARY/CHANGE OF REGISTRATION



Document No

BURS 1A (REVISED 2018)

PLOT 54379 CBD
PRIVATE BAG 0013
GABORONE
BOTSWANA
Toll Free 17649
TEL: 3638000/3639000 FAX: 3639999/3953101

PLEASE: PRINT YOUR PARTICULARS IN BLOCK LETTER OR TICK THE APPROPRAITE BOX. DO NOT LEAVE ANY COLUMN BLANK. IF THE INFORMATION ASKED IS NOT APPLICABLE PLEASE STATE "NOT APPLICABLE"

Registration as a taxpayer Re-registration for other tax types Branch Registration

TIN

SECTION A : PARTICULARS OF THE APPLICANT

1. Select the source of income you are registering for. (Tick the appropriate box)

Employment Rental Farming

Other Business (Please specify)

2. Indicate what type of tax (es) you are registering for. (Tick the appropriate box)

Income Tax PAYE VAT Capital Transfer

Other Withholding taxes(construction, rental, management & consultancy fees etc)

3. Title (Mr, Mrs, Miss, Dr, Sir, Prof,

4. Surname

5. First Name (s)

6. Is the applicant Legally Disabled? Yes No

7. Omang Resident Permit No

8. Passport No. (For Non Citizens)

9. Previous Passport No. (For Non

10. Country of Citizenship

11. Residential Status Resident Non- Resident

12. Address for service of notice

a. Botswana Postal Address P O Box

Private Bag

Postnet Name

City/Town/Village

Continued

c. Physical Address

Plot No

Location/Ward

City/Town/Village

Country

22. Contact Numbers

a. Home b. Cellphone

c. Fax d. Office

23. Email Address

SECTION C : BUSINESS INFORMATION

24. Business name

25. Trade Name 1.

26. Trade Name 2.

27. Date of commencement of

28. Accounting year/ Financial year

VAT DETAILS (To be completed when registering for VAT only)

29. Taxable turnover/ Annual

30. Date taxable turnover was

31. Liable date

32. Exempt turnover

33. Estimated value of imports

34. Indicate whether you are Importer Exporter VAT Exporter

35. Are you an Employer Yes No

36. Date of becoming Employer

FARMING

37. Quantity Cattle Sheep Goats

Others (Please specify) Quantity

Size of Farm in hectares

38. Physical Address of Business

Plot No

Location/Ward

City/Town/Village

Country

SECTION D : PARTICULARS OF YOUR REPRESENTATIVE

39. Do you have tax agent? Yes No

40. Name

41. TIN

42. Address

a. Botswana Postal Address

P O Box

Private Bag

Postnet Name

City/Town/Village

b. Botswana Postal Services Location

House No Apartment No

Street Name

Location/Ward

City/Town/Village

c. Physical Address

Plot No

Location/Ward

City/Town/Village

Country

43. Contact Numbers

a. Home b. Cellphone

c. Fax d. Office

44. Email Address

SECTION E: DETAILS OF THE BANK ACCOUNT

45. a. Name of Bank

b. Branch

c. Account No

d. Account Type (please tick the appropriate box)

Cheque/Current Savings Corporate

Credit Deposit

Name of Account Holder

Confirmation by the bank (to be completed by an authorised officer of the bank)

Name

Designation

Signature

Office Stamp

