



## Company Requesting Non Tax Resident Status

This form is for the use of all companies requesting non tax resident status.

All completed applications should be emailed to [revenueservice@gov.gg](mailto:revenueservice@gov.gg) with a subject header of "Company Non Tax Resident Request".

A letter will be sent once the application has been accepted, which will detail any future responsibilities for the company.

1. COMPANY INFORMATION		
Company Name		
Tax Reference Number		
Registration Number		
Country of Incorporation		
Registered Address	Post Office Box <i>(optional)</i>	
	Suite <i>(optional)</i>	
	Floor <i>(optional)</i>	
	Building Name/Number	
	Street	
	City	
	Country	
	Post Code	
Contact Name		
Daytime Telephone Number		
E-mail Address		
Date Company became Non Resident		
Reason for change in Residency		

2. Correspondence Address		
If you would like to use a different address for correspondence please complete this section		
Registered Address	Post Office Box <i>(optional)</i>	
	Suite <i>(optional)</i>	
	Floor <i>(optional)</i>	
	Building Name/Number	
	Street	





**6. BENEFICIAL OWNER****Ultimate Beneficial Owner(s) (natural person)****Taxpayer Identification number (TIN)****Legal name of taxpayer****Address****Post Office Box** *(optional)***Suite** *(optional)***Floor** *(optional)***Building Name/Number****Street****District Name** *(optional)***City****Country****Post Code****7. PARENT ENTITIES****Ultimate Parent Company****Taxpayer Identification number (TIN)****Legal name of taxpayer****Address****Post Office Box** *(optional)***Suite** *(optional)***Floor** *(optional)***Building Name/Number****Street****District Name** *(optional)***City****Country****Post Code****Immediate Parent Company****Taxpayer Identification number (TIN)****Legal name of taxpayer****Address****Post Office Box** *(optional)***Suite** *(optional)***Floor** *(optional)***Building Name/Number****Street****District Name** *(optional)***City****Country****Post Code**

**8. DECLARATION**

*The person signing this declaration should be fully aware of the circumstances of the company, and either hold an appropriate position in the applicant's business with sufficient authority to make the declaration, or have authority to deal on the applicant's behalf.*

**I hereby declare that the information I have given in this application is correct and complete to the best of my knowledge and belief and that it is not motivated by the avoidance, reduction or deferral of the liability of any person to tax.**

Signature..... Date .....

Printed name.....

**The capacity in which you are making the application for the applicant .....**

**FAIR PROCESSING NOTICE:**

The information you have provided on this form is required under the Income Tax (Guernsey) Law, 1975 for the purposes of the assessment and collection of income tax. This information will be processed in line with the Data Protection (Bailiwick of Guernsey) Law, 2017. For full details of our Fair Processing Notice and how we look after your data please visit: <https://www.gov.gg/revenueservice>. If you don't have access to the internet please contact us and a paper copy will be provided.

**FOR OFFICE USE ONLY:**

Has approval been given that the company is non-resident? YES  NO

Suffix changed to /I? YES  NO

Company notified that they are no longer resident? YES  NO

ETI team notified if company will no longer be submitting ETI returns? YES  NO

File passed to EOI unit? YES  NO

Information exchanged with other Jurisdictions as required? YES  NO

Comments

Signature..... Date .....

Form 707 (10/19)

Revenue Service, PO Box 37, St Peter Port, Guernsey, GY1 3AZ

Tel: +44 (0) 1481 705700 E-mail: [revenueservice@gov.gg](mailto:revenueservice@gov.gg) Website: [www.gov.gg/revenueservice](http://www.gov.gg/revenueservice)