

REGISTRATION FOR TAXPAYER IDENTIFICATION NUMBER (TIN) COMPANIES

Please complete this form and email to info@ers.org.sz

For official use

Income tax number

Taxpayer identification number

PAYE Number

PART A: BUSINESS DETAILS (Tick ONLY one box)

- ☐ Company
 ☐ Society/Club/Association
 ☐ NGO
 ☐ Partnership/Joint Venture
 ☐ Parastatal
- ☐ Government
 ☐ Municipality
 ☐ Trust
 ☐ Foreign Company
 ☐ Branch
- ☐ Permanent Establishment
 ☐ Other

BUSINESS TYPE (Please tick appropriate business type(s))

AGRICULTURE

- ☐ Sugar Cane
☐ Poultry
☐ Vegetables
☐ Citrus Fruits
☐ Cereals (Maize, Wheat Sorghum etc.)
☐ Cutting & Processing of Trees (Logging)
☐ Mixed Farming
☐ Other:.....

AGRICULTURE:

- ☐ Furniture
☐ Processing & Preserving of Meat
☐ Processing & Preserving Fruit & Vegetables
☐ Iron & Steel (Welding, Fencing, etc.)
☐ Grain Products (Milling)
☐ Bakery Products
☐ Animal Feeds
☐ Textiles
☐ Air Conditioning
☐ Chemicals & Fertilizers
☐ Other:.....

CONSTRUCTION:

- ☐ Roads & Railway
☐ Buildings
☐ Electrical Installations
☐ Plumbing
☐ Other:.....

REAL ESTATE:

- ☐ Property Renting & Leasing

WHOLESALE & RETAIL:

- ☐ Restaurants & Catering Services
☐ Sale of Clothing, Footwear
☐ Specialized Store Retail
☐ Retail of Food, Beverages and Tobacco
☐ Retail via Stalls (Spaza)
☐ Sale of Motor Vehicles
☐ Hardware Stores
☐ Pharmacy & Medical Goods (Other Specialized)
☐ Computer Sales
☐ Bars & Bottle Stores (Specialized Beverages)
☐ Hotels & Guest House
☐ Other:.....

PROFESSIONAL SERVICES:

- ☐ Lawyers
☐ Accountants, Auditors Tax Consultants
☐ Architectural & Engineering
☐ Management Consultants
☐ Security Services
☐ Renting & Leasing of Vehicles
☐ Advertising
☐ Other:.....

OTHER SERVICES:

- ☐ Computer Repairs
☐ Dry Cleaning
☐ Hair Dressing & Beauty
☐ Sports Facilities (Gyms)
☐ Household Appliance & Electrical Repairs
☐ Membership Organizations (Churches/ Clubs)
☐ Professional Membership Organizations
☐ Driving Schools
☐ Other:.....

BUSINESS TYPE (Continued) (Please tick appropriate business type(s))**TRANSPORT:**

- ☐ Freight by road
☐ Public transport
Other:.....

INFORMATION AND COMMUNICATION:

- ☐ Computer Programming & Consultancy
☐ Printing & Recording Media
Other:.....

FINANCIAL & INSURANCE:

- ☐ Pension Funds
☐ Fund Administrators (Medical Aid)
☐ Insurance
Other:.....

PUBLIC SERVICE/HUMANITARIAN SERVICES:

- ☐ Hospital & Related Activities
☐ Schools/Education Institutions
☐ Non-International NGOs
☐ Government Department/Public Administration/Municipality
☐ Social Work Activities
Other:.....

OTHER BUSINESS, TYPE PLEASE SPECIFY**PART B: COMPANY DETAILS**

Company identification n.o.	<input type="text"/>	Financial year end	<input type="text"/>
Company registration n.o.	<input type="text"/>	Date of incorporation	<input type="text"/>
Email address	<input type="text"/>		
Postal address	<input type="text"/>	Physical address	<input type="text"/>
Telephone n.o.	<input type="text"/>	Mobile n.o.	<input type="text"/>
Preferred mode of contact	<input type="checkbox"/> Mobile	<input type="checkbox"/> Telephone	<input type="checkbox"/> Email

DIRECTORS (If more than two directors, request additional form)

Surname:	<input type="text"/>	Graded Tax Nr.	<input type="text"/>
First name(s):	<input type="text"/>	Last 9 digits only	<input type="text"/>
PIN	<input type="text"/>	Residential address	<input type="text"/>
Postal address	<input type="text"/>	Not postal address	<input type="text"/>
Email address:	<input type="text"/>		
Cellphone no.:	<input type="text"/>	Telephone no.	<input type="text"/>
Surname:	<input type="text"/>	Permit expiry date*	<input type="text"/>
First name(s):	<input type="text"/>	Country of issue*	<input type="text"/>
Graded Tax Number:	<input type="text"/>	Country of Origin	<input type="text"/>
Permit Number*	<input type="text"/>	Postal address	<input type="text"/>
Passport Number*	<input type="text"/>	Residential address	<input type="text"/>
Country of issue*	<input type="text"/>	Not postal address	<input type="text"/>
Postal address	<input type="text"/>		
Email address:	<input type="text"/>		
Cellphone no.:	<input type="text"/>	Telephone no.:	<input type="text"/>

PART C: TAX TYPES, TAX DETAILS

INCOME TAX	<input type="checkbox"/>		
Company Operation Start Date	<input type="text"/>	<input type="text"/>	* Estimated Taxable Income E <input type="text"/>
PAYE	<input type="checkbox"/>		
Commence Date of PAYE Deductions	<input type="text"/>	<input type="text"/>	Total Number of Employees <input type="text"/>
VAT	<input type="checkbox"/>		
Commencement Date of VAT Taxable Activity	<input type="text"/>	<input type="text"/>	** Estimated taxable supplies E <input type="text"/>
Estimated Annual Imports	E <input type="text"/>		

* *Income Tax – Net Profit/Income*
 ** *VAT – Taxable Turnover*

APPOINTMENT OF PUBLIC OFFICER/NOMINATED PERSON

	*INCOME TAX (Assign one of the registered RESIDENT directors)	*VAT (Nominated person must be RESIDENT in Eswatini)
Name		
TIN		
PIN/Passport		
Postal Address		
Cellphone Number		
Telephone Number		
Email Address		

INCOME TAX
 * Please be advised that you have been appointed Public Officer in terms of Section 51(3) of the Income Tax Order, 1975. If you wish to change such appointment, you may apply through the normal application procedure within seven (7) working days after confirmation of TIN registration.

VAT
 ** A representative for VAT is the Nominated Officer as provided by Section 77 of the VAT Act, 2011.

PART D: DETAILS OF BANK ACCOUNT

The bank account must be in the name of the Applicant

[illegible]

BANK STAMP

PART E: ATTACHMENTS AND DECLARATION

Current Bank Statement (3 months) /Original Bank letter:

☐

Proof of Physical Location (Lease Agreement or current Utility Bill):

☐

National Identity Document (Local Directors, Public Officer and all appointed e-Tax users):

☐

Passport for Company Directors (Non-Citizens):

☐

Trading licence

☐

Certificate of incorporation

☐

Form J

☐

Authorization letter for e-Tax users

☐

Other supporting documents: _____

PART F: ETAX REGISTRATION. If you have more than 4 e-Tax users, please download and complete an e-Tax Application Form.

New

☐

Details update

☐

NAME OF USER(S)	PIN	EMAIL ADDRESS	POSITION	TAX TYPE
				PAYE <input type="checkbox"/> VAT <input type="checkbox"/> INCOME TAX <input type="checkbox"/> PROVISIONAL TAX <input type="checkbox"/> ATL <input type="checkbox"/>
				PAYE <input type="checkbox"/> VAT <input type="checkbox"/> INCOME TAX <input type="checkbox"/> PROVISIONAL TAX <input type="checkbox"/> ATL <input type="checkbox"/>
				PAYE <input type="checkbox"/> VAT <input type="checkbox"/> INCOME TAX <input type="checkbox"/> PROVISIONAL TAX <input type="checkbox"/> ATL <input type="checkbox"/>
				PAYE <input type="checkbox"/> VAT <input type="checkbox"/> INCOME TAX <input type="checkbox"/> PROVISIONAL TAX <input type="checkbox"/> ATL <input type="checkbox"/>

DECLARATION TO BE SIGNED BY PUBLIC OFFICER/DIRECTOR

I _____ (full names) hereby declare that the particulars given herein are true and complete and hereby apply for registration.

Signature:

Position in the Company:

Date:

 DD MM YYYY

Ensure your business details are always up to date by completing a Taxpayer Profile Maintenance Form downloadable from our website. This will enable you to receive notices and information on time.

eTax Terms and Conditions;

By signing this form you agree to abide by all rules, orders, policies and procedures governing the use of the electronic filing system. Each nominated user shall protect the security of their password and immediately notify the ERS if you suspect that any of the passwords have been compromised.