



**NATIONAL REVENUE AUTHORITY
Domestic Tax Department (DTD)
Republic of Sierra Leone**

DTD 001A

FOR PARTNERSHIP,
Companies, NGO'S, MDA'S

Section A

TAXPAYER INFORMATION FORM

Name of Business [1]

Trading Name [2]

Taxpayer Identification No.(TIN) {if any} [3]

Trading Commenced (or will commence) [4] Day / Month / Year

Business Address [5] Street
Town/District/Region

Telephone No. and E-mail [6] Land Line Mobile
Email Address

Web site Adress

skype or other social network address

Type of Taxpayer (Tick One) [7] Partnership Private Ltd Company Public Ltd Company Charity,NGO's
State owned Enterprise Others If others specify [8]

Registration date [9] Day / Month / Year Registration Number [10]

Annual Turnover (12 months sales) [11] In Words
Figures (Le)

Describe your business activities. E.g.restaurant,spare parts[12]

Sector (see note for help) [13] Auditor [14]

Contact Person [15]	Position	Phone No.	Email Address
1			
2			
3			

Section B

CERTIFICATE

[16] I declare that the informaton given above are correct and complete
(Full name of signatory in BLOCK LETTERS)

Position .Eg Partner, Director etc [17] Signature Date Day / Month / Year

Section C

FOR NRA OFFICIAL USE ONLY

Approved by officer [18] Tax Centre [19] Business Sector Code [19]

Entered By [20] Taxpayer Identification No.(TIN) [21]

DTD 001A COMPLETION NOTES

please request for next form- DTD 002 .If you have branch(es) please ask for 'DTD003A Form' for the Branch(es)

If you need clarification or assistance in completing this form please contact the Domestic Tax Department ,Groundfloor, 17/19 Wellington Street Freetown

GUIDANCE NOTES

This form is to be completed for Businesses other than Sole Proprietorships or Individuals.

Attach a photocopy of Certificate of Registration. Request for the other two forms-**DTD002 and DTD 003A** to complete the DTIS registration

Box Number

- 1** - Enter name of business as entered on Certificate of Incorporation or registered name of the partnership
- 2** - If you have a trading name different from that at [1] above - enter here. If not leave it blank.
- 3** - Enter your Taxpayer Identification Number (TIN)
- 4** - Enter the date you started trading or intend to start you trading
- 6** - Enter details for your principal place of business - the address from which your day today business affairs are conducted. Current E-mail address, number of land- line and mobile phone of the business, Web site address, Skype address or any social networking address.
- 7-8** - Who owns the business? - Tick one box only for the legal entity. For "other"s give further details at box [8] below.E.g. Clubs, Charities, Diplomatic Missions.
- 9-10** - The Registration number on the Administrator and Registrar General 's Certificate. Every registered business must have this number/TIN and date of registration. In the case of non-profit organisations (e.g. MDA's, etc) Certificate of registration issued by the relevant authorising body is required. This information must be provided.
- 10** - Enter the total value of all sales/turnover for the last 12 month period. This should include standard rated, zero rated, exempt and institutional relief sales. (Give the figures to the nearest thousand leones).
- 11** - Enter the total value of sales/turnover for the last 12 month period).
- 12** - State the main business activity(ies) or type of goods and services your are engaged in.
- 13** - Choose the applicable Sector: Aerospace, Defence and Marine, Agriculture & Agri-processing, Chemicals, Clothing & Textiles Construction & Materials, Creative Industries;Delivery Services/Logistics, Education, Electronics; Energy; Engineering; Environment & Waste; Gaming and Betting; Mining and Extractive Industries; Financial Services; Fisheries & Marine Resources; Food and Drink, Forestry; Healthcare; Pharmaceuticals & Biotechnology; ICT - Information & Communication Technology; Insurance; Manufacturing; Media; Mining & Metals; Oil & Gas; Personal & Household Goods; Public Sector Entity; Research & Development; General Merchandise, Sports and Recreation; Technical Consultancy; Telecommunications; Tourism & Leisure; Transportation and Vehicles; Utilities; Water;
- 14** - Name of External Auditor/ Accountant of the business
- 15** - Name of contact person. A person in management position in the business, who interact with NRA
- 16 - 17** - Certificate to be completed as follows:

- * **Partnership** - one of the Partners
- * **Company** - a Director or Company Secretary
- * **SOE/Public Corporation** -a Director or Company Secretary
- * **Others** -Legally responsible person

18 - 21 - DO NOT FILL ITEMS 18-21