

## TAX REGISTRATION

TR1

## This form can be used by:

- 1. An individual complete parts A(1), A(3), A(4) and B, C, D and/or E as appropriate.
- 2. A partnership, trust or unincorporated body complete parts A(2), A(3), A(4) and B, C, D and/or E as appropriate to register for, Income Tax, VAT, as an employer for PAYE/PRSI, or for Relevant Contracts Tax (RCT).

**Note** if you are completing Part A2 and/or C of this form, on registration, you will be required to make payments and returns by electronic means using ROS. Details on ROS and the returns and related tax liabilities that must be paid and filed electronically are available on **www.revenue.ie**.

## It should not be used by:

- PAYE employees taking up employment for the first time use Form 12A,
- Companies use Form TR2,
- A body whose sole aim is to receive a registration number to obtain a grant/tax clearance certificate use a form Exempt Registration available on the website,
- Persons who are collection agents for non-resident landlords use Collection Agent Registration form available on the website.

Complete ALL parts of this form as required (\* denotes a required field) IN BLOCK LETTERS, sign the declaration below and return it to your Revenue District Office, details can be found on www.revenue.ie. Without accurate information the registration(s) will be delayed and/or you may experience delays in receipt of Returns and other forms.

A1 Individuals - Give the following information of the person who is to be registered and then compl	lete Sec	tion <b>A</b> :	3/A4			
1. Forename* 2. Surname*						
3. Gender* Male Female 4. Nationality*						
5. Date of Birth* D D M M Y Y Y Y A 6. Private Address*						
7. PPSN*						
(for information on how to obtain a PPSN refer to www.welfare.ie)						
8. Phone No  9. Garda National Imm Bureau Number (GN	nigration	n				
E-Mail 10. Stamp Number	(11.D)					
11. Civil Status* Single Divorced Widowed						
Tick ☑ the						
relevant box Married A former Civil Partner A Surviving Civil I	Partner					
In a Civil Partnership Married but living apart In a Civil Partners	ship but l	living a	apart			
12. If married or in civil partnership state the following details in respect of your spouse or civil p	partner:					
Name PPSN PPSN						
or if PPSN not known	Data	of Birt	h			
Pre-marriage or Pre-Civil Partnership surname			YY	Y		
	J 101 100		.   .			
13. If you want to have your tax affairs dealt with in Irish, tick ☑ the box						
A2 Partnership, Trust or Unincorporated Body - Give the following information of the body	who is t	o be r	egiste	red		
and then complete Section A4						
14. Name of the Body to be registered*						
15. Responsible Person* §						
(a) Name						
(b) Address						
§ Responsible person. Chairperson or secretary of the group, or precedent partner in the case of a partnership						
group, or precedent partner in the case of a partnership						
16. If previously registered state tax no. used						

## General Details

7.	Partnership, Trust or Other Body (a minimum of 2 partners are required)
	Give the following information in respect of all partners, trustees or other officers. Under 'Capacity', state whether
	acting precedent partner, partner, trustee, treasurer, etc. If necessary continue on a separate sheet.

Name	Private Address Cap			pacity PP			PSN (Partners only)					
								·	·			
3 Business Details												
3. State Registration number			ıidation /									
Receivership of company	/ Individual on whos	e behalf you act										
4 Business Details												
9. If trading under a busines		g as										
0. Legal Format (tick ☑ appro		) Other [	$\neg$	Cnasie.								
Sole Trade	Partnership	Other		Specify								
1. Business Address (if diffe	rent to private addre	ess)										
		Phone nu										
		Website ad										
		Mobile phone nu										
		] [	E-Mail									
2. Type of business* (a) Is the business	mainly retail	] ma	ainly wholes	sale		ma	ainly	mar	านfล	ctu	rina	
, ,	ng & construction	<u></u>	eat process				-	vice			_	
(b) Describe the business of		_	•		tion su	ch a						
'clothing manufacturer', 'shopkeeper', 'manufacturer'	'property letting', 'dair	y farmer', 'investme									as	
the english that the second	alata di a etti etti.		lata Day 12	20								
the application is a property re		-		59. □								
3. If the business will supply			OX *		B. // 3. *	3.7	* *	37	l			
4. When did the business or	-		D	DM	MY	Y	Y	Y				
5. To what date will annual a	-		D	DM	MY	Υ	Y	Υ				
6. State the expected turnov												
<ol><li>Adviser Details - Give the f returns of the business.</li></ol>	following details of you	ır accountant or tax	adviser, if a	any, who v	vill pre	pare	the	acc	oun	ts a	nd 1	
Name		Phone nu	umber									
Address		] E	E-Mail									
		Mobile phone nu	ımher									
		]										

VAT (i.e. VAT3's) RCT Employer PAYE/PRSI

Part A continued	General Details	
29. If you rent your business of the landlord (not an esta	premises, state - Name and private address te agent or rent collector)	
The amount of rent paid pe	r week month year (tick ☑ fre	equency) €
The date on which you star	ted paying the rent	D D M M Y Y Y
The length of the agreed re	ntal/lease period.	
30. If you acquired the busin The name and current add from whom you acquired it	ess from a previous owner, state ress of the person	
The VAT/registered numbe	r of that person	
Part B	Registration for Income Tax (non-PAYE	<del>.</del> )
31. If you are registering for	ncome Tax tick ☑ the box   and indicate your main source	e of income below:
Other	n Income (incl. Salary & Pension) Rental Income Specify	Investment Income
•	ng society account to which Income Tax refunds can be made	<b>):</b> 
Bank/Building Society		
Branch Address		
<b>IBAN</b> (Max. 34 characters)		
BIC (Max. 11 characters)		
Part C	Registration for VAT	
	VAT tick ☑ box and complete this part	
35. Registration	ch you require to register for VAT *	
	ught only in respect of European Union (EU) acquisitions?	
(This applies only to far	mers and non-taxable entities) (tick ☑)	Yes No
<ul><li>(c) Are you registering bec</li><li>(i) your turnover exce</li><li>for registration? Or</li></ul>	ause * eds or is likely to exceed the limits prescribed by law	(i) Tick either
(ii) you wish to <b>elect to</b> to be registered)? <b>(</b>	be a taxable person, (although not obliged by law Or	(ii) (ii) or (iii) as appropriate)
	business to business services where the reverse charge to a copy of the invoice if this is the case.	(iii)
goods and services? (tick	•	Yes No
If your answer is 'Yes', is the (a) expected annual turnow	is because er will be less than €1,000,000,	(a) (Tick either
` '	pected annual turnover will come from supplying goods and o are not registered, e.g. hospitals, schools or the general public	(b) (a) or (b) as appropriate)
37. State the expected annua	I turnover from supplies of taxable goods or services within	the State *
38. State your bank or buildi	ng society account to which refunds can be made:	
Bank/Building Society		
Branch Address		
IBAN (Max. 34 characters)		
BIC (Max. 11 characters)		
•	perty details for VAT purposes	
(a) Address of the property		
(b) Date purchased or whe	n development commenced	D D M M Y Y Y

Pa	art C continued	Registiati	on for VAT					
39.	. (c) Planning permission referer	nce number, if applic	able					
	(d) A signed statement from you will be disposed of or used i the Landlord's 'option to tax	in a manner which w						
	In the case of a partnership, the	e statement should b	oe signed by the preceden	it acting partner.				
Pá	art D	Registrati	ion as an Employe	r for PAYE/F	PRSI			
40.	. If you are registering as an er	mployer for PAYE/F	PRSI tick ☑ box and com	plete this part				
41.	Persons Engaged							
	(a) How many <b>employees</b> are:		ly working 30 hours or mo lly working less than 30 ho	•				
	(b) State the date your first emp			•	D D M	MY	V .	V V
12	. What payroll and PAYE/PRSI	•	•		D D IVI	IVI	'	
72.	(a) Computer System	_	a computerised payroll page	•	d register for	the Rev	/ANI I	2
	(a) Computer System	On-Line service (	(ROS) at www.revenue.ie to file your P35 End of Yea	to receive electr	onic copies o			7
	(b) Other Manual System	Wages books are	e available from Office Sup	ppliers/Stationer	y Bookstores	6		
43.	Correspondence on PAYE/PR If correspondence relating to PA details if different from Panel 27	AYE/PRSI is being d	lealt with by an agent, tick	☑ this box	and giv	ve the fo	ollowi	ng
	Name		Phone number					
	Address		E-Mail					
			Mobile phone number					
	Tax Adviser Identification Number (TAIN)		Client's Reference					
_	· · ·							
Pá	art E	Registrati	ion for Relevant Co	ontracts Tax	(RCT)			
No Pri Re inc	te that Principal Contractors a ncipal Contractors are obliged verse Charge rules. Please ref cluding guides on Principal Co	re obliged to use F d to register and ac fer to Part C of this entractor obligation	Revenue's Online Servic count for VAT in relation form, Registration for V is, is available on the Re	e to fulfill their n to Constructio (AT). Detailed in	RCT obligation Services	under ton RCT		
No Pri Re inc	te that Principal Contractors a ncipal Contractors are obliged verse Charge rules. Please ref cluding guides on Principal Co . Are you applying to register a	re obliged to use F d to register and ac fer to Part C of this entractor obligation as a (tick ☑ relevan	Revenue's Online Service count for VAT in relation form, Registration for Vas, is available on the Rest box): *	e to fulfill their n to Constructio (AT). Detailed in	RCT obligation Services of ormation of www.reven	under ton RCT ue.ie	and	VAT,
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