

APPLICATION FOR BIR NUMBER BOARD OF INLAND REVENUE

FORM IA—001

Please Type or Print

SECTION A—For Individual Applicants

1	Applicant's Name (<i>Surname</i>)	
2	First Name	Middle Name
3	Date of Birth/dd/mm/yyyy	4 Occupation
		5 Sex
		<input type="checkbox"/> Male <input type="checkbox"/> Female
6	Mother's Maiden Name	7. Pin Number
8	Residential Address	
9	Mailing Address (if different from above)	
10	Telephone (<i>Home</i>)	(<i>Workplace</i>)
		(<i>Cell</i>)
11	E-mail Address	
12	Identification Document (<i>Please attach copy [both sides] of any one of the mentioned Identification Documents to this form</i>)	
	National ID Number:	Driver's Permit Number
		Passport Number
13	If Self-Employed, state your Business Name:	
14	If Self-Employed, state your Business Address:	
15	If Self-Employed, state the Nature of your Business:	Date Business Started: dd/mm/yyyy
16	If Self-Employed, do you have any employees?	17 If Yes, state the number of persons you employ:
	<input type="checkbox"/> Yes <input type="checkbox"/> No	
18	Do you make or intend to make commercial supplies over \$200,000? If yes please complete lines 39 to 41 at Section B	
	<input type="checkbox"/> Yes <input type="checkbox"/> No	
19	Applicant's Signature	20 Date: (dd/mm/yyyy)

Do not write in the spaces below

BIR No. _____

Account Number	Tax Type