

## TAX AGENT REGISTRATION APPLICATION Inland Revenue Division

	Tax Identification	Number (TIN	):							
Note: You must be a member of the Institute of Solomon Islands Accountants (ISIA) to										
be a tax a	gent.									
Surname:										
First name:		Middle Nan	ne:							
Gender (T	Fem	Female Male								
Moiling	PO Box (if applicable) or									
Mailing Address:	street name.									
	Village, Town, City									
	District or Province									
Email:		Telephone:								
		T								
Residential	Street name and parcel number (if known)									
address (if different from	Village, Town, City									
mailing address):	District or Province									
Email:		Telephone:								
Tick One:	usiness will you operate as tax a	r Comp	·							
	company officer, please provide een established.	e the name and	l TIN	of the	e par	tners	ship (	or co	mpan	ıy, if
Name:		,	TIN:							
2. Are you insolvent? Tick One: YES NO  If you ticked YES, provide details:										

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3. Are you a government employee or government office holder?											
						Tick	One:		YES		NO
	If you ticked YES, provid	If you ticked YES, provide details:									
4.	Have you ever been conviyears? If you ticked <b>YES</b> , provide		ffence		erious Cick O		_	y countr YES	_		t 15
5.	Do you have a good know  If you ticked <b>YES</b> , provid	-	x law	rs?	Tick	One:	☐ YI	ES $\square$	NO		
	J										
6.	How many years have you tax matters (in the Solomo				orofess	sion th	at requi	red advi	sing c	lients	on
										Ye	ears
7.	Details of membership of Institute of Solomon Islands Accountants (ISIA) (Attach evidence)										
	Membership Number	Memb	er Sta	atus (tick	box)			Year 3	Joined		
		Certified Practicing Accountant		Registere Bookkee							
8.	Are all of your own tax lo		ments	s and other	tax ol	_	ons up t	o date?	YES		No
	If you ticked <b>NO</b> , provide	details:									

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## **DECLARATION**

I apply for registration as a tax agent under section 29 of the Tax Administration Act 2022. I declare that:

- the particulars shown in this application (including any attachments) are to the best of my knowledge, information and belief, true and correct in every detail, and
- the proposed authorised employees attached are not disqualified persons within the meaning of section 30(2) of the Act.

Note that under the Taxation Administration Act 2022, there are penalties for making a false or misleading declaration on an IRD document, and possible prosecution resulting in a fine and/or prison sentence.

Signature:		Day	Month	Year
	Office Use Only			
Processed by:	Conditions att	ached to	registration (i	f any)
Date:				
Tax agent number assigned:				

## **SCHEDULE OF AUTHORISED EMPLOYEES** – See Instructions

Advice of authorised employees of a tax agent – section 26(2)(c) of the Taxation Administration Act 2022

EMPLOYEE FULL	EMPLOYEE ADDRESS:	RELEVANT QUALIFICATIONS
NAME:		AND EXPERIENCE:

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