



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 agent.

| | | | |
|--------------------|--|---------------------|--|
| Surname: | | | |
| First name: | | Middle Name: | |

Gender (Tick One)

Female

☐

Male

☐

| | | | |
|-------------------------|---|-------------------|--|
| Mailing Address: | PO Box (if applicable) or street name. | | |
| | Village, Town, City | | |
| | District or Province | | |
| Email: | | Telephone: | |

| | | | |
|---|---|-------------------|--|
| Residential address (if different from mailing address): | Street name and parcel number (if known) | | |
| | Village, Town, City | | |
| | District or Province | | |
| Email: | | Telephone: | |

1. What type of business will you operate as tax agent:

Tick One:

☐

Sole trader

☐

Partner

☐

Company officer/director etc.

If as partner or company officer, please provide the name and TIN of the partnership or company, if it has already been established.

| | | | | | | | | | |
|--------------|--|-------------|--|--|--|--|--|--|--|
| Name: | | TIN: | | | | | | | |
|--------------|--|-------------|--|--|--|--|--|--|--|

2. Are you insolvent?

Tick One:

☐

YES

☐

NO

If you ticked **YES**, provide details:

3. Are you a government employee or government office holder?

Tick One:

☐

YES

☐

NO

If you ticked **YES**, provide details:

4. Have you ever been convicted of a tax offence, or any serious offence, in any country, in the last 15 years?

Tick One:

☐

YES

☐

NO

If you ticked **YES**, provide details:

5. Do you have a good knowledge of the tax laws?

Tick One:

☐

YES

☐

NO

If you ticked **YES**, provide details:

6. How many years have you worked in employment or a profession that required advising clients on tax matters (in the Solomon Islands or overseas)?

| |
|-------|
| Years |
|-------|

7. Details of membership of Institute of Solomon Islands Accountants (ISIA) (Attach evidence)

| Membership Number | Member Status (tick box) | | | | Year Joined |
|-------------------|---------------------------------|--------------------------|-----------------------|--------------------------|-------------|
| | Certified Practicing Accountant | <input type="checkbox"/> | Registered Bookkeeper | <input type="checkbox"/> | |

8. Are all of your own tax lodgements, payments and other tax obligations up to date?

Tick One: ☐ YES ☐ No

If you ticked **NO**, provide details:

| |
|--|
| |
|--|

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 attached to registration (if 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 NAME: | EMPLOYEE ADDRESS: | RELEVANT QUALIFICATIONS AND EXPERIENCE: |
|----------------------------|--------------------------|--|
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