



OFFICE USE ONLY

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IRD number issued/confirmed

# IRD number application – non-individual

Please answer all questions and sign the declaration.

1. Print the full **name** of the organisation

  


2. Is this application for a **branch**?

No  Yes—print the IRD number of the main branch or head office then go to Question 15

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3. Tick the organisation type from the list below

**Company**

- Close company
- Widely held company
- Unit trust
- Cooperative
- Public authority
- Local authority
- Special company
- Non-resident contractor
- Life insurance
- Agent non-resident insurer

**Partnership**

- Ordinary partnership
- Special partnership
- Non-resident contractor

**Superannuation scheme**

- Registered – Category 1
- Registered – Other
- Not registered
- Foreign

**Maori authority**

- Please complete a *Māori authority election (IR 483)* form

**Estate or trust**

- Qualifying trust
- Foreign trust
- Non-qualifying trust
- Estate
- Sick, accident, death fund

**Club or society**

- Incorporated society or club
- Unincorporated society or club
- Friendly society
- Building society
- Industrial and provident society

4. If the **trade name** is different from the name shown above, print it here

  


5. Print the **street address** of the place of business

  

Street address

  

Suburb or RD Town or city

6. Print the usual **postal address** only if it is different from the street address. **Do not use your tax agent's address here**

  

Street address or PO Box number

  

Suburb, RD or box lobby Town or city

7. Print the organisation's contact phone number(s)

<input style="width: 90%; height: 20px;" type="text"/>	<input style="width: 90%; height: 20px;" type="text"/>	<input style="width: 90%; height: 20px;" type="text"/>
Business	After hours	Fax

8. Print the organisation's email address

9. Please attach one of the following documents as identification

**We would prefer you to send photocopies** but if you do send original documents we will send them back to you.

- Certificate of incorporation for companies
- Deed of trust for trusts
- Certificate of incorporation for incorporated societies

10. What is the organisation's start date?

Day	Month	Year		

For non-residents, please use the date your business started in New Zealand.

11. Is the organisation a New Zealand resident for tax purposes?

- No  Yes

If you are unsure about this please phone Inland Revenue on 0800 377 774.

12. Main business activity

- 13.** Do you expect your annual turnover to be over \$40,000?  No  Yes Complete a *GST registration (IR 360)* form.
- Do you intend to employ people?  No  Yes Complete an *Employer registration (IR 334)* form.
- Do you wish to register as a payer for resident withholding tax on interest?  No  Yes Complete a *Resident withholding tax – interest payer registration (IR 450)* form.
- Do you wish to elect to be a qualifying company or a loss attributing qualifying company?  No  Yes Complete a *Qualifying company or loss attributing qualifying company election (IR 436)* form.
- You can get these forms from our website [www.ird.govt.nz](http://www.ird.govt.nz) or by phoning INFOexpress on 0800 257 773.

- 14. Companies only** Will you be providing fringe benefits to shareholder-employees?  No  Yes

**All organisations, please complete this question**

- 15.** Print the name, address and personal IRD number of each shareholder (close company), director, partner, trustee or executive office holder. Continue on a separate sheet if necessary.

<input type="text"/>	<input type="text"/>
Name	Designation or title
<input type="text"/>	<input type="text"/>
Address	IRD number

<input type="text"/>	<input type="text"/>
Name	Designation or title
<input type="text"/>	<input type="text"/>
Address	IRD number

<input type="text"/>	<input type="text"/>
Name	Designation or title
<input type="text"/>	<input type="text"/>
Address	IRD number

- 16.** Print the full name of the contact person for your organisation

<input type="text"/>	<input type="text"/>
Surname	First name(s)

Contact numbers

<input type="text"/>	<input type="text"/>	<input type="text"/>
Business	After hours	Fax

**17. Declaration**

Name of authorised person

Designation or title

*I declare that the information given on this form is true and correct.*

<input type="text"/>	<input type="text"/>
Signature	Date

**Notes**

Do not show your tax agent's address. Your tax agent maintains a client list with us. Please ask them to give us the address for your mail.

**Nominated persons**

We can't discuss your organisation's tax affairs with anyone except those people listed at Question 15. However, you can nominate someone else to take care of them or have access to your IRD records. You can also have them receive your statements, refunds and other correspondence. You'll still be responsible for the organisation's tax affairs, so you will need to make sure any returns are filed and tax is paid by the due date.

For more information or to nominate someone to act on your behalf, you can:

- phone us on 0800 377 774, or
- complete an *Elect someone to act on your behalf (IR 597)* form, which you can get from our website [www.ird.govt.nz](http://www.ird.govt.nz) or by phoning INFOexpress on 0800 257 773 (remember to have your IRD number handy).

**Password**

You can now set up a password for your organisation. Phone us on 0800 377 774 for more information.

**Send the completed form to us at the following postal addresses.** If you live in:

Northland	Auckland	other North Island areas	the South Island
send it to	send it to	send it to	send it to
Inland Revenue	Inland Revenue	Inland Revenue	Inland Revenue
Southern Processing Centre	Northern Processing Centre	Central Processing Centre	Southern Processing Centre
PO Box 3752	PO Box 1454	PO Box 39090	PO Box 3752
Christchurch	Hamilton	Wellington Mail Centre	Christchurch