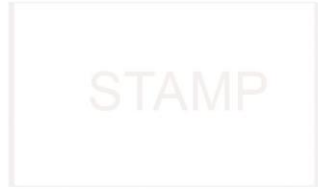




Swaziland Revenue Authority

DOMESTIC TAXES DEPARTMENT

TCC 01



P.O. Box 5628, Mbabane, Swaziland Tel: (+268) 2406 4000 Fax: (+268) 2406 4001 E-mail: info@sra.org.sz Website: www.sra.org.sz

APPLICATION FOR A TAX COMPLIANCE CERTIFICATE (TCC)

A TCC WILL **ONLY BE ISSUED** IF THE TAXPAYER COMPLIES TO THE FOLLOWING:

1. The applicant is registered as a taxpayer with SRA.
2. All tax returns have been submitted.
3. All outstanding taxes have been paid or satisfactory arrangements to settle those have been made.

Please complete this form and return to your nearest Swaziland Revenue Authority office: USE BLOCK LETTERS

Name of Taxpayer:

Taxpayer's Postal Address:

Taxpayer Identification Number (TIN):

PIN (for individuals)

Income Tax Number:
(Graded Tax Number for individuals)

Intended use for TCC (TICK WHERE APPLICABLE)

Company Director Import Permit Motor Vehicle Registration

Property Transfer Submit Tender Trading Licence

Other (please specify): _____

DECLARATION by taxpayer or public officer (in case of a company)

I hereby declare that the information in this application is true and correct.

I also authorize _____

ID number to apply for and collect a TCC on my behalf.

DATE: Signature of Applicant: _____

FULL NAME:

NB: Where a TCC is being collected by an agent or representative. An original ID should be provided.

Specific TCC Application Requirements

If applying for a TCC for the following; Transfer of shares, transfer of immovable property and/or registration of a second hand vehicle; complete information below

Name of seller or buyer:

TIN:

PIN (for individuals)

Income Tax Number:
(Graded Tax Number for individuals)

FOR OFFICIAL USE: CONFORMANCE CHECKLIST

PROCEDURE CHECK	STATUS	COMMENTS
All documents attached as per TCC SOP.		
TIN ownership verified		
Public Officer on the authorization letter same as on the system.		
Compliance verification on RMS with all returns filing and payments in all tax types.		
Check valid debt arrangement on RMS.		

STATUS: NC – Non Conformance C -Conformance I - Inconclusive

TCC Number: to

Recommendation : Approved Declined

Comments: _____

Date:

Conformance checked and approved by: _____