

**BR01**

**Domestic Tax**

**Department**

**Rev. April 2015**

**Branch Appendix**

**(FOR USE BY ORGANIZATIONS AND SOLE-PROPRIETORSHIPS)**

Fields with \* are mandatory, dates in mm/dd/yyyy.

Please keep a copy for your records.

|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
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| logo**Instructions:**   1. Use this appendix for new registration, modification or closure of a branch of any type of business. 2. If your business has more than one branch completes this appendix for each branch and staple to the PC01 or IN01 form. | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 1. BRANCH | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 1a. Enterprise TIN | | | | | | | | | | | | | | | | | | | 5 | |  | |  | |  | |  | |  | |  |  | |  |
| 1b. Branch Name | | | | | | | | | | 1c. Start Date\*  (mm/dd/yyyy) | | | | | | | | 1d. Closure Date  (mm/dd/yyyy) | | | | | | | | | | | | | | | | |
| 1e. Telephone # | | | | | | | | | | 1f. Alternate # | | | | | | | | 1g. Email | | | | | | | | | | | | | | | | |
| 1h. Registration Date\* (mm/dd/yyyy) | | | | | | | | | | | 1i. Registration number | | | | | | | | | | | | | | | | | | | | | | | |
| 2. BRANCH ADDRESS | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 2a. Street and House #\* | | | | | | | | | | | 2b. Clear Description of Location\* | | | | | | | | | | | | | | | | | | | | | | | |
| 2c. City/Village/Town | | | | | | | | | | | | 2d. District\* | | | | | | | | | | | | | | | | | | | | | | |
| 2e. County\* | | | | | | | | | | | 2f. Country\* | | | | | | | | | | | | | | | | | | | | | | | |
| 2g. PO Box | | | | | 2h. Building type where business is located\*:  Residential IndustrialCommercial | | | | | | | | | 2i. Do you pay rent?\*  Yes No | | | | | | | | | | | | 2j. Head Office  Yes No | | | | | | | | |
| **ACTIVITY INFORMATION** | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| **Code (OFFICIAL USE)** | | | | | | | | | 3a. Business Activity Description\* | | | | | | | 3b. Main Activity\* (1 only) | | | | | | | | | | | | | | | | | | |
|  | |  | |  | | |  | | 1. | | | | | | | Yes | | | | | | | | | | | | | | | | | | |
|  | |  | |  | | |  | | 2. | | | | | | | Yes | | | | | | | | | | | | | | | | | | |
| **4. BANK ACCOUNT INFROMATION ( OPTIONAL)** | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 4a. Account Number | | | | | | | | 4b. Account Holder | | | 4c. Bank Name | | | | | | | | | | | 4d. Branch Address | | | | | | | | | | | | |
|  | | | | | | | |  | | |  | | | | | | | | | | |  | | | | | | | | | | | | |
| **5. BRANCH** | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 5a. TIN of Enterprise | | | | | | | | | | |  | |  | |  | |  | | |  | | | |  | | | |  | |  | | |  | |
| 5b. Branch Name | | | | | | | | | | 5c. Start Date\*  (mm/dd/yyyy) | | | | | | | | 5d. Closure Date  (mm/dd/yyyy) | | | | | | | | | | | | | | | | |
| 5e. Phone # | | | | | | | | | | 5f. Mobile # | | | | | | | | 5g. Email | | | | | | | | | | | | | | | | |
| 5h. Registration Date\* (mm/dd/yyyy) | | | | | | | | | | | 5i. Registration Number | | | | | | | | | | | | | | | | | | | | | | | |
| 6. BRANCH ADDRESS | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 6a. Street and House #\* | | | | | | | | | | | 6b. Landmark (Clear Description of Location) | | | | | | | | | | | | | | | | | | | | | | | |
| 6c. City/Village/Town | | | | | | | | | | | 6d. District\* | | | | | | | | | | | | | | | | | | | | | | | |
| 6e. County\* | | | | | | | | | | | 6f. Country\* | | | | | | | | | | | | | | | | | | | | | | | |
| 6g. PO Box | | | | | 6h. Building type where business is located\*:  ResidentialIndustrialCommercial | | | | | | | | | 6i. Do you pay rent?\*  Yes No | | | | | | | | | | | | 6j. Head Office  Yes No | | | | | | | | |
| **7. ACTIVITY INFORMATION** | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| **Code (OFFICIAL USE)** | | | | | | | | 7a. Business Activity Description\* | | | | | | | | 7b. Main Activity\* (1 only) | | | | | | | | | | | | | | | | | | |
|  |  | |  | | |  | | 1. | | | | | | | | Yes | | | | | | | | | | | | | | | | | | |
|  |  | |  | | |  | | 2. | | | | | | | | Yes | | | | | | | | | | | | | | | | | | |
| **8. BANK ACCOUNT INFORMATION (OPTIONAL)** | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 8a. Account Number | | | | | | | | 8b. Account Holder | | | 8c. Bank Name | | | | | | | | | | | 8d. Branch Address | | | | | | | | | | | | |
|  | | | | | | | |  | | |  | | | | | | | | | | |  | | | | | | | | | | | | |
| **9. CERTIFICATION** | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| I certify that the information given above and in the attached appendices is true, accurate and complete to the best of my knowledge; I also understand that any false declaration may lead to prosecution. | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 9a. CFO Full Name\* | | | | | | | | | | | 9b. Signature\*  9c. Date\* 9d. Telephone #\* | | | | | | | | | | | | | | | | | | | | | | | |
| 9e. CEO Full Name\* | | | | | | | | | | | 9f. Signature\*  9g. Date 9h. Telephone #\* | | | | | | | | | | | | | | | | | | | | | | | |
| **FOR OFFICIAL USE ONLY** | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
|  | | | | | | | | Name | | | Date | | | | | | | | | | | Signature | | | | | | | | | | | | |
| Received By | | | | | | | |  | | |  | | | | | | | | | | |  | | | | | | | | | | | | |
| Captured By | | | | | | | |  | | |  | | | | | | | | | | |  | | | | | | | | | | | | |
| Validated By | | | | | | | |  | | |  | | | | | | | | | | |  | | | | | | | | | | | | |