



PAPUA NEW GUINEA  
Taxation Act 1959  
**APPLICATION FOR REGISTRATION AS A TAX AGENT  
(INDIVIDUAL)**

NAME IN FULL (Use Block Letters)	SURNAME	CHRISTIAN NAMES
Nature of Business		
Business Address		If more than one office, the address of the Head Office and of each Branch Office must be stated
Residential Address		
Address for Service Of Notices. (Use Block Letters)		Telephone _____ Fax _____
Date of Birth		
Academic Qualifications		Attach documentary evidence of any Degree, Diploma, or membership of any recognised Accountancy or Secretarial Institute.
Brief summary of:- (a) Experience in Taxation matters in the last ten years. (b) Commercial Experience		
Name of Present Employer		Enclose original reference by employer, addressed to the Commissioner General. If self-employed, enclose two references.
Particulars of registration as a Tax Agent relating to Income Tax in any country other than PNG.	Name of Board _____ Registration Number: _____	
Has registration as a Tax Agent been cancelled or refused in any country outside PNG? If so. give details.		

The Registrar of Tax Agents  
Internal Revenue Commission  
Port Moresby

I hereby apply for registration as a Tax Agent under the provisions of Part VIII of the Taxation Act, and enclosed the prescribed fee of K 1,000.

In support of this application I have set out the information shown on this form.  
I declare that this information is true and correct in every particular.

Dated this \_\_\_\_\_ Day of \_\_\_\_\_ 20

Signature of witness \_\_\_\_\_ Signature of Applicant \_\_\_\_\_

Address of Witness \_\_\_\_\_  
\_\_\_\_\_

FOR OFFICE USE ONLY

Reverse of the Application for Registration Form