

Re Sebeletsa Uena, Re Sebeletsa Sechaba

Tel: +266 22313796 or 5221 5000
Fax: +266 22312091
Website: www.lra.org.ls

(To be used by all individual taxpayers, except sole traders. Individuals required to register include employees, directors, and partners. Sole traders must use Business Taxpayer Registration Form.)
PLEASE USE BLOCK LETTERS WHEN COMPLETING THIS FORM.

[illegible]

1. Application type (tic box)	New	Amendment		
2. Title (tic box)	Mr	Ms	Mrs	Miss

3a. Surname	
3b. Forenames	
4. Maiden name (if any)	
5. Date of birth	<div> <div>D</div> <div>D</div> <div>M</div> <div>M</div> <div>Y</div> <div>Y</div> <div>Y</div> <div>Y</div> </div>
6a. Valid passport number (if any) (attach certified copy of passport)	
6b. Passport expiry date	<div> <div>D</div> <div>D</div> <div>M</div> <div>M</div> <div>Y</div> <div>Y</div> <div>Y</div> <div>Y</div> </div>
6c. Country of issuance	
7a. Foreign identity number (if any) (attach certified copy of identity document)	
7b. Country of issuance	
8a. Other form of identification (if no passport or foreign identity number given). Specify (attach certified copy of identification)	
8b. Other identification number	
8c. Expiry Date	<div> <div>D</div> <div>D</div> <div>M</div> <div>M</div> <div>Y</div> <div>Y</div> <div>Y</div> <div>Y</div> </div>
9. Country of birth	
10. Country of residence	
11. Country of citizenship	

12a. Postal address (including postal code)		
12b. Physical address	Chief/Street name	
	Village	
	Town	
	District	
13a. Home phone number		(Code)
13b. Office phone number		(Code)

13c. Cell phone number	(Code)											
13d. Fax number	(Code)											
13e. Email address												
EMPLOYMENT AND MARITAL DETAILS												
14. Names of employers or nature of other income-generating activities subject to tax in Lesotho during the past 12 months (if more than five, attach list)												
15. Marital status (tick box)	<input type="checkbox"/> Single <input type="checkbox"/> Married <input type="checkbox"/> Divorced <input type="checkbox"/> Separated <input type="checkbox"/> Widowed											
16. If married, tick applicable box:	<input type="checkbox"/> In community of property <input type="checkbox"/> Antenuptial agreement (attach certified copy of agreement)											
17. Spouse's name(s)												
18. Spouse's maiden name(s)												
19. Spouse's TIN(s) (if any)	<table><tr><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td>-</td><td></td></tr></table>										-	
									-			
BANK DETAILS												
20. Bank account details (attach list if more than two accounts):	First account	Second account										
20a. Name of account holder												
20b. Country where bank is located												
20c. Name of bank												
20d. Branch												
20e. Account number												
20f. Account type												
20. Swift Code												

Declaration

I declare that the information given on this form is correct and complete to the best of my knowledge and belief. I understand that false or misleading information may result in prosecution.

Name (print) _____

Signature _____

Date

D	D	M	M	Y	Y	Y	Y
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FOR OFFICIAL USE ONLY

TIN assigned (if any)

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☐ Approved ☐ Not approved (state reasons) _____

Processor (print) _____ Signature _____

Date

D	D	M	M	Y	Y	Y	Y
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Approver (print) _____ Signature _____

Date

D	D	M	M	Y	Y	Y	Y
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