



BIR Form No.

0901-T

February 2021 (ENCS)

Page 1

Application for Treaty Purposes

(Relief from Philippine Income Tax on Profits from the Operation of Ships or Aircraft in International Traffic)

Enter all required information in CAPITAL LETTERS using BLACK ink. Mark all applicable boxes with an "X". Two copies MUST be filed with the BIR and one held by the Taxpayer.



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Part I – Legal Basis of Claim for Relief

[illegible]

Part II – Identification of Income Recipient

3 Name of Income Recipient										
4 Local Taxpayer Identification Number (TIN)					5 RDO Code		6 Foreign TIN			
<div> <div></div> <div>-</div> <div></div> <div>-</div> <div></div> <div>-</div> <div></div> </div>					<div> <div></div> <div></div> </div>					
7 Date of Establishment						8 Contact Number (Landline/Mobile No.)				
(MM/DD/YYYY)										
9 Email Address										
10 Country where the recipient is taxable as resident and where it is to pay tax										
11 With permanent establishment (PE) in the Philippines?					12 With license to do business in the Philippines?					
<input type="checkbox"/> Yes <input type="checkbox"/> No					<input type="checkbox"/> Yes <input type="checkbox"/> No					
13 Taxpayer Identification Number of the PE									14 RDO Code	
15 Address of the PE										
								15A ZIP Code		
16 Details of Business										

Part III – Details of Income Payor

17 Registered Name (Last Name, First Name, Middle Name for Individual OR Registered Name for Non-Individual)																																																																																																			
18 Taxpayer Identification Number (TIN)																																			-					-					-					19 RDO Code																																																	
20 Registered Address																																																																																																			
																																																																																					20A ZIP Code														
21 Contact Number (Landline/Mobile No.)																														22 Email Address																																																																					
23 Details of Business																																																																																																			
24 Registered with the Bureau of Investments (BOI)?																																																		25 Engaged in preferred pioneer areas of investment?																																																	
<input type="checkbox"/> Yes																									<input type="checkbox"/> No																									<input type="checkbox"/> Yes																									<input type="checkbox"/> No																								
26 Related to the income recipient?																																																		26A If yes, describe the nature of relationship																																																	
<input type="checkbox"/> Yes																									<input type="checkbox"/> No																																																																										

Part IV – Details of Income and Withholding Tax

27	Kind of Income	Description	Amount of Income

28 Is the income effectively connected with the PE in the Philippines? ☐ Yes ☐ No

29 Amount of Withholding Tax Paid, if any

30 Date of Payment (MM/DD/YYYY)

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Part V – Authorized Representative in the Philippines <i>(attach proof of authorization)</i>			
31 Registered Name <i>(Last Name, First Name, Middle Name for Individual OR Registered Name for Non-Individual)</i>			
32 Taxpayer Identification Number (TIN)	-	-	33 RDO Code
34 Registered Address			
34A ZIP Code			
35 Contact Number <i>(Landline/Cellphone No.)</i>		36 Email Address	

Part VI – Certification			
I/We certify, under the penalties of perjury, that this application form has been made in good faith, and that I/we have verified the representations including the accompanying documents thereto, and that, to the best of my/our knowledge, belief and information, are correct, complete and true account of the transaction subject of this application. I/We further certify that: <ul style="list-style-type: none"> i. The income recipient is the beneficial owner of the income to which this form relates; and ii. The beneficial owner is a resident of the other contracting state within the meaning of the applicable tax treaty. <p>Finally, I/we give my/our consent to the processing of my/our information as contemplated under the Data Privacy Act of 2012 (R.A. No. 10173) for legitimate and lawful purposes.</p>			
		Stamp of BIR Receiving Office and Date of Receipt (RO's Signature)	
Signature over Printed Name of the Beneficial Owner/Authorized Representative/Tax Agent			
Tax Agent Accreditation/Attorney's Roll Number, if applicable			
Date of Issue (MM/DD/YYYY)		Date of Expiry (MM/DD/YYYY)	
		ITAD Filing Reference No:	

***NOTE: The BIR Data Privacy Policy is in the BIR website (www.bir.gov.ph)**