

For official use

**START-UP NOTIFICATION**

Limited companies, co-operatives, savings banks,
foundations, associations and other organisations

Y1

This form is for having your enterprise entered in the Trade Register, Foundation Register, VAT Register, Employer Register and the Register of payers of tax on insurance premiums and for enabling the tax office to calculate your income-tax prepayment.

Send the completed form to: PRH - Verohallinto, Yritystietojärjestelmä, PL 2000, 00231 HELSINKI

Name of enterprise or organisation			
Company Name (treated as a suggested name until the Trade Register has approved it)			Language
			<input type="checkbox"/> Finnish <input type="checkbox"/> Swedish
Alternative Company Name 2		Alternative Company Name 3	

Domicile (a municipality located in Finland)

Other company names (fill in if needed)	
Parallel names (translations of the company name into foreign languages)	
Auxiliary Name	Description of activities under this Auxiliary Name
Auxiliary Name	Description of activities under this Auxiliary Name

Address information for general use (postal or street address is mandatory)			
Postal address (street/road, house/apartment no or PO Box no)		Postal code	Town or City
Street address (street/road, house/apartment no)		Postal code	Town or City
Telephone	Mobile phone	Fax	
e-mail		Website	

Requesting registration in following registers:			
<input type="checkbox"/> Trade Register (enclose receipt for proving you paid the fee)	<input type="checkbox"/> VAT Register	<input type="checkbox"/> Employer Register	
<input type="checkbox"/> Foundation Register	<input type="checkbox"/> Prepayment Register	<input type="checkbox"/> Register of payers of tax on insurance premiums	

Type of enterprise (Please complete the appendix form applicable to your enterprise; see list on page 2)		
<input type="checkbox"/> Housing company	<input type="checkbox"/> Co-operative	<input type="checkbox"/> Association
<input type="checkbox"/> Public limited company	<input type="checkbox"/> Foundation	<input type="checkbox"/> Other type, please specify: _____
<input type="checkbox"/> Limited company (=private limited company)	<input type="checkbox"/> Branch of a foreign enterprise	

Accounting period	
Accounting period (dd.mm. - dd.mm.)	End date of the first accounting period (dd.mm.yyyy)

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The company is established because its form of incorporation has changed (Complete the Personal Data Form.)		
Full name or Business Name of the precedent	Date of birth (dd.mm.yyyy)	Citizenship (if not Finnish)

Who can provide the Tax Administration with further information; an individual or an accounting firm etc.?		
Name		Business ID or Finnish personal identity code
Postal address	Postal code	Town or City
Telephone	Mobile phone	
Fax	e-mail	

Who can provide the Trade Register or the Foundation Register with further information; an individual or an accounting firm etc.?		
Name		
Postal address	Postal code	Town or City
Telephone	Mobile phone	
Fax	e-mail	

TRADE REGISTER: ACCELERATED PROCESSING REQUESTS
We normally process the completed application forms on a first come, first served basis. Exceptions are made when the applicant refers to a valid reason. Requests for accelerated processing cannot always be granted.
<input type="checkbox"/> Enclosing a written request, citing a valid reason for demanding a specific registration date.

Additional information

APPENDIX FORMS FOR SPECIFIC LEGAL ENTITIES (Complete one of the following forms.)

<input type="checkbox"/> 1 Limited company or public limited company	<input type="checkbox"/> 5 Right-of-occupancy association or resident administered area or European economic interest grouping or branch of an interest grouping located in Finland but registered in another country or mortgage society savings bank or state public enterprise
<input type="checkbox"/> 1B Housing company	
<input type="checkbox"/> 2 Cooperative or cooperative bank	
<input type="checkbox"/> 3 Branch of a foreign enterprise	<input type="checkbox"/> 11 Foundation
<input type="checkbox"/> 4 Mutual insurance company or public mutual insurance company or insurance association	<input type="checkbox"/> 12 Association

Please complete pages 3 - 4 on this form if you selected VAT Register, Prepayment Register, Employer Register or the Register of payers of tax on insurance premiums on page 1.

Date and signature		
Date	Signature and printed name	Telephone

For a legal statement regarding the use of stored personal data, as required by §24, Personal Data Act, visit www.ytj.fi or contact the National Board of Patents and Registration / Tax Administration.

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Postal address to be given to the Tax Administration		
<input type="checkbox"/> Tick this box if your postal address is the same as the address you entered on page 1, for general, public use. <input type="checkbox"/> Otherwise write your address below.		
Postal address	Postal code	Town or City

Bank account number	
IBAN	BIC

Main operating sector (main line of business) to be declared to the Tax Administration

Registration for VAT value-added-tax		
Registration for VAT	VAT registration for purchases or for own use	Registration for Notification Duty for supply of services in EU
<input type="checkbox"/> as of (date)	<input type="checkbox"/> as of (date)	<input type="checkbox"/> as of (date)
VAT registration as a foreign company	Registration only for Notification Duty as a foreign company	VAT registration as a distance seller, foreign company
<input type="checkbox"/> as of (date)	<input type="checkbox"/> as of (date)	<input type="checkbox"/> as of (date)
<input type="checkbox"/> Only engaged in primary production		

Applying for a VAT liability (Fill in Additional information on page 4 to give details.)		
Assignor of the right to use a property §12 and §30, VAT Act (enclose rental contract)	Small-case business operator, non-profit/religious entity (§12.1, VAT Act)	Intra-Community acquisitions (§26f, VAT Act) (mm.dd.yyyy - dd.mm.yyyy)
<input type="checkbox"/> as of (date)	<input type="checkbox"/> as of (date)	<input type="checkbox"/>
Foreign enterprise (§12.2, VAT Act)	Distance sales (§ 63a, VAT Act)	Primary producer applies for VAT liability
<input type="checkbox"/> as of (date)	<input type="checkbox"/> as of (date)	<input type="checkbox"/> as of (date)

Exclusion from VAT (Fill in Additional information on page 4 to give details.)		
<input type="checkbox"/> Small-scale operation (§3, VAT Act)	<input type="checkbox"/> Financial services (§41, VAT Act)	<input type="checkbox"/> Non-profit/religious entity (§4-5, VAT Act)
<input type="checkbox"/> Healthcare services (§34, VAT Act)	<input type="checkbox"/> Insurance services (§44, VAT Act)	<input type="checkbox"/> Other non-VAT operations, please specify:
<input type="checkbox"/> Social services (§37, VAT Act)	<input type="checkbox"/> Fees to performing artist or royalties (§45, VAT Act)	_____
<input type="checkbox"/> Instructor services (§39, VAT Act)	<input type="checkbox"/> Real property right (§27, VAT Act)	

Liability for tax on insurance premiums
Registering as liable to pay tax on insurance premiums
<input type="checkbox"/> as of (date)

Payroll information	
Registering as an employer paying wages on a regular basis	Registering as an employer paying seamen's work income
<input type="checkbox"/> as of (date)	<input type="checkbox"/> as of (date)

VAT reporting and payment periods
Please leave blank unless your first-year sales will remain below €50,000 and you are thus entitled to longer periods of reporting/payment.
Sales for current year (This includes all selling in Finland and overseas.)
_____ €
Desired length of reporting and payment
Please leave blank unless you want to have a shorter period than you are entitled to.
<input type="checkbox"/> Monthly <input type="checkbox"/> Quarterly

Desired length of reporting and payment, primary producers/creators of works of art only
Please leave blank unless you want to have a different period than Yearly.
Desired length of reporting and payment
<input type="checkbox"/> Monthly <input type="checkbox"/> Quarterly

Prepayment registration

Requesting entry in the Prepayment Register (§25, Prepayment Act)

as of (date)

Additional information

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