## Non-Individual Taxpayer profile

**PIN Details** 

PIN P052249266P **Taxpayer Name** Copper Syntec Ltd

Section A: Basic Information

**Business Income Details** 

**Business Type** Company **Business Sub Type Private Company** 

**Business Registration** 

**Certificate Number PVT-LRUYKPDA** 

18/08/2023 /Single Business **Commencement Date** 

**Permit Number** 

**Accounting Period** 

**End Month** 

Business Registration <sub>22/06/2023</sub> **Business Name** Copper Syntec Ltd

**Date** 

**Business** 

No

Trading /Business December Name-If different than

registered name

Does your business **EPZ Effective Date** No

have any branches?

Do you wish to declare Legal

Representative? **SEZ Effective Date**  Legal Representative

PIN

**NSSF Details** 

**NSSF Number** 

**Principal Physical Address** 

ATHI RIVER **LR Number Building BUSINESS PARK** Street/Road **MACHAKOS** 

**ENTERPRISE ROAD** City/Town Machakos **District** Athi River District County

Tax Area/Locality **Descriptive Address** Athi River

**Principal Postal Address** 

**Postal Code** 00500 **Town ENTERPRISE ROAD** 

P.O.Box 17550

**Principal Contact Details** 

**Mobile Number Telephone** 0113832195 Number

**Mobile Number Mobile Number** 

(2) (3)

Main Email Secondary COPPERSYNTECLTDITAX@GMAIL.COM **Address** 

Website

## SMS Notification-

Would you like to Subscribe/Unsubscribe of receiving alerts through SMS?

**Alternative Address and Contact Details** 

Do you have an Alternative Address?

No

**Details of company Ownership Structure** 

Is the Company you are registering a
Subsidiary Company?

Is the Principal Holding Company Resident in
Kenya?

Holding Company PIN
Name of Holding Company

**Country in which Holding Company is located** 

**Bank Account Details** 

Do you wish to declare your Bank Account for tax refunds?

No

Please list the sector of the Economy in which you are involved

Please list the sector of the Economy in which you are involved————					
	Sr. No.	Section	Group	Description	Туре
	1	SERVICE ACTIVITIES	null	null	Primary

**Details of Acquisition/Amalgamation** 

Sr. No. Type of Bond PIN Taxpayer Name Email Address Date
Not Available

Section B: Taxpayer Obligation

Tax ObligationRegistration DateiTax Rollout DateIncome Tax Company18/08/202301/01/2024

Section D : Person Associated with Business (i.e. Director, Partner, Business Associate)

Sr. No.Nature of AssociationPINProfit/Loss Sharing Ratio1DirectorA020038153QN.A.

Section E-I: Tax Agent authorized to submit any application on behalf of Taxpayer

Sr. PIN Telephone Mobile Email Authorization Date Authorization Date Number Address Since Upto
Not Available

Section E-II: Intermediary Agent to submit returns on behalf of the Taxpayer

Sr. PIN Tax Telephone Mobile Email Authorization Authorization No. Obligation Number Number Address Date Since Date Upto

Not Available

Print Close