

APPLICATION FORM FOR TAX CLEARANCE CERTIFICATE**FORM 1****I. Name and address of the applicant****Citizen ID No:****TPN for registered taxpayer:****Telephone No/Fax No:****II. Please specify for which purpose the Tax Clearance Certificate is required.**Election Purpose Renewal of license Closure of Business Transfer of Business Ownership Transfer of Business Location Tender Bidding/Service Contracts Others **III. Find mentioned below my declaration on businesses under my ownership:****(a) Details of business owned by the applicant (use separate sheet if required):**

Sl. No.	Name of Business	TPN/Entity Code	License No.	Address of the Unit

(b) If the applicant, is or was a partner to a partnership business

Name of Partnership Business

Applicant's period of partnership

(c) Details of other partner(s)

Name of partner	<input type="text"/>	TPN	<input type="text"/>
Name of partner	<input type="text"/>	TPN	<input type="text"/>
Name of partner	<input type="text"/>	TPN	<input type="text"/>

IV Did you file your PIT Return.

Yes No Am not liable for PIT

I hereby declare, to the best of my knowledge and belief that the information contained in this application form is correct and true. In case, if any information is found untrue and false, I shall be liable for fines and penalties as per Chapter 5 of the General Provisions of the Income Tax Act of the Kingdom of Bhutan, 2001.

Affix a Legal Stamp

Signature

Applicant's name:

Date:

Tax Administration Section
RRCO: _____

Checklist of Information to be verified before issuing TCC

If there are outstanding taxes or dues, indicate the Region, Section, Year of tax dues and outstanding in the remarks column.

Details of the owner/applicant

Name: _____

CID No: _____

TPN: _____

Personal Income Tax (PIT)

Is there any outstanding Yes No

Remarks: _____

Business Income Tax (BIT)

Is there any outstanding Yes No

Remarks: _____

Corporate Income Tax (CIT)

Is there any outstanding Yes No

Remarks: _____

Section Head
Tax Administration Section

SALES TAX SECTION

Is there any outstanding Yes No

Remarks: _____

**Section Head
Sales Tax Section**

CUSTOMS & EXCISE SECTION

Is there any outstanding Yes No

Remarks: _____

**Section Head
Sales Tax Section**

REVENUE ACCOUNTS & AUDIT SECTION

Is there any outstanding Yes No

Remarks: _____

**Section Head
Sales Tax Section**