## GOVERNMENT OF THE REPUBLIC OF TRINIDAD AND TOBAGO BOARD OF INLAND REVENUE

## APPLICATION FOR EXEMPTION FROM STAMP DUTY IN RESPECT OF RESIDENTIAL PROPERTIES

Date of Execution of Deed		Value of Property	
Name and Address of Attorneys			
Name and Address of Vendor			
of Property		•••••	
		•••••	
Name and Address of Purchaser of Property			
or respond			
Area of Land			
*Comp. Cert. No		*D.R.S. Asst. N	lo
Is the property for use mainly for residential purposes?		☐ Yes	□ No
Is the property for use other than residential?		☐ Yes	□ No
If yes, state area and specif	-		
I certify that the above info	rmation is true and corre	ct.	
		· · · · · · · · · · · · · · · · · · ·	Signature of Purchaser
*If unable to furnish this informa	ation, kindly state reason	(s) for omission.	
	FOR OFFICIAL	USE	
Date Stamped		Stamp Duty Exempted \$	
Authorised by		Stamp Duty Paid	