

**MINISTRY OF FINANCE
INLAND REVENUE DIVISION
INFORMATION UPDATE FORM
CORPORATIONS**

Instructions:

1. This form must be completed and signed by either a Director or Secretary of the Company or any other duly authorised person. In addition, please provide a copy of your identification e.g. identification card, passport or driver's permit.
2. Please provide documentary evidence to support any change.
3. For questions which are not applicable, indicate by "N/A" in the relevant space.



GOVERNMENT OF THE REPUBLIC OF TRINIDAD AND TOBAGO
MINISTRY OF FINANCE
INLAND REVENUE DIVISION

**Information Update Form
For Corporations**

Please print in block letters

Use black ink only

BIR No.	PAYE No.	VAT No. (If Applicable)	
New Legal Name			
Prior Legal Name			
New Trade Name			
Prior Trade Name			
Nature of Business			
Date of Incorporation (dd/mm/yyyy)		Date of Commencement of Business (dd/mm/yyyy)	
Email Address		Telephone No.	
New Business Address		Prior Business Address	
New Mailing Address		Prior Mailing Address	
Directors			
Name	Telephone No.	BIR No	ID No.
Other Information (As Applicable)			

Name of Director/Authorised Agent (Block Letters): _____
 Identification No.: ID DP PP _____

Signature: _____ Date: _____

KINDLY SUBMIT COMPLETED FORM TO A DISTRICT REVENUE OR REGIONAL OFFICE.

FOR OFFICIAL USE	NAME OF OFFICER:	APPROVED BY (NAME):
	POSITION:	SIGNATURE
	SECTION:	DATE APPROVED:
	DATE COMPLETED:	

This document was created with Win2PDF available at <http://www.daneprairie.com>.
The unregistered version of Win2PDF is for evaluation or non-commercial use only.