

MINISTRY OF FINANCE
INLAND REVENUE DIVISION
INFORMATION UPDATE FORM
INDIVIDUALS

Instructions:

1. This update form must be completed and signed by the taxpayer or Authorised Agent *. In addition, please provide a copy of your identification e.g. identification card, passport or driver's permit
2. * An Agent should present his ID and a letter of authorisation from the taxpayer.
3. Please provide documentary evidence to support any change.
4. 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
Individuals**

Please print in block letters

Use black ink only

BIR No.	PAYE No. (If applicable)	VAT No. (If applicable)
New Name		
Prior Name		
New Trade Name		
Prior Trade Name		
Date of Birth (dd/mm/yyyy)		Date of Registration (dd/mm/yyyy)
Telephone No.		Date of Commencement (dd/mm/yyyy)
Email Address		National Identification No.
Driving Permit No.		Passport No.
New Business Address		Prior Business Address
New Mailing Address		Prior Mailing Address
Other Information (As Applicable):		

Name of Taxpayer/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:	

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