



Government of the Republic of Trinidad and Tobago

Ministry of Finance
Inland Revenue Division

Application for VAT Bonds

I, the undersigned, hereby apply for VAT Bonds to be issued for the payment of refunds of VAT, due and payable to _____, for the periods listed below. I also accept that the value of the bonds will be rounded down to the nearest thousand dollar and any remaining balance being paid via a cheque.

Business Information

BIR Number:

VAT Account Number:

Letter ID Number:

Business Name:

Business Mailing Address:

Business Phone Number:

Banking Information

Name of Bank:

Account Number:

This is required by the Central Bank of Trinidad and Tobago for the deposit of interest payments

VAT Periods

Month Ending

Year

Month Ending	Year

Applicant Information

Applicant Name:

Position or Title:

Date:

Applicant Signature:
