



Government of Tonga

FORM 7
APPLICATION FOR TAX CLEARANCE

Ministry of Revenue & Customs
QSC Ex-Student Center, Railway Road, Nuku'alofa, TONGA
Telephone (676)7400550 Fax (676) 25018

Section A - APPLICANT'S DETAILS

TIN Number:
Registered Business Name:
Contact Number:
Postal Address:

Section B - Purpose (please tick appropriate box or boxes)

TDB Loan
Government Procurement
Export of Sandalwood / Sea cucumber
Employment Visa
Business/Liquor/Coastal Trade License
Change of Ownership/Director/Shareholder
Transfer of Lease
Any other purpose

Please Specify

Section C - SOURCE OF FUNDS (please tick the appropriate box)

Business
Personal
Others (please specify).....

Section D - TAX AGENT/Accountant DETAILS

Name:
Tax Agent/Accountant Number:
Phone:
Address:

DECLARATION

I, [] declare that the information in this application is true and correct in every detail.

Signature:
Date: / /

IT IS A SERIOUS OFFENCE TO MAKE A FALSE STATEMENT UNDER SECTION 85, REVENUE SERVICES ADMINISTRATION ACT 2021

OFFICE USE ONLY

TC Number: []

Verified and entered by:
Approved by:
Date: / /
Date: / /