

Application for Non-Resident Taxpayer Identification Number

Please fill out this form on your device before printing, or print the blank form and complete it by hand in blue or black ink.

1. Applicant Information

First Name / Given Name:

Middle Name:

Last Name / Surname:

Date of Birth (DD/MM/YYYY):

Country of Birth:

Country of Citizenship:

2. Address in Country of Residence

Street Address:

City or Town:

State, Province, or Region:

Postal Code / ZIP Code:

Country:

3. Mailing Address (If different from above)

Street Address / PO Box:

City or Town:

State, Province, or Region:

Postal Code / ZIP Code:

Country:

4. Reason for Applying

Specify Reason (e.g., claiming treaty benefits, receiving passive income, tax return filing):

5. Declaration and Signature

I declare under penalty of perjury that I have examined this application, and to the best of my knowledge and belief, it is true, correct, and complete.

Printed Name of Applicant:

Date (DD/MM/YYYY):

Signature (Sign inside the box after printing):