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The Bizsetup blog is the corporate website of the Business Setup Group. It's founded by Max Soutter, widely considered Zimbabwe's top marketing & business setup advisor and certainly the most generous!

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- **How to start up and setup your business for success, including comprehensive information on registering a company in Harare, Zimbabwe**
- Inspirational stories and articles to get you juiced for success!
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- Access to highly effective products and services you won't find anywhere else in Zimbabwe to help launch and grow your business at record speed.
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If you're starting, growing or investing in a business in Zimbabwe, feel free to contact Max directly on either max.soutter@gmail.com or max@bizsetup.co.zw



VAT 1

ZIMBABWE REVENUE AUTHORITY
VAT: APPLICATION FOR REGISTRATION

| | | | | | | | | | | | | | | | | | | | | | | | | | |
|---|---|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|
| Please complete this form and return the completed form to your nearest Zimbabwe Revenue Authority Office. Use block letters | For Official Use Only | | | | | | | | | | | | | | | | | | | | | | | | |
| | VAT Number | | | | | | | | | | | | | | | | | | | | | | | | |
| | <table border="1"> <tr><td> </td><td> </td><td> </td><td> </td><td> </td><td> </td><td> </td><td> </td><td> </td><td> </td><td> </td><td> </td><td> </td></tr> </table> | | | | | | | | | | | | | | | | | | | | | | | | |
| | | | | | | | | | | | | | | | | | | | | | | | | | |
| Taxpayer Identity Number (TIN) | | | | | | | | | | | | | | | | | | | | | | | | | |

PART [I] NATURE OF PERSON *(Tick where applicable)*

| | | | | |
|-------------------------------------|--------------------------|--|-------------------------|--------------------------|
| 1. Sole Trader: | <input type="checkbox"/> | <i>(Please also complete form VAT 2)</i> | Estate: | <input type="checkbox"/> |
| Partnership: | <input type="checkbox"/> | <i>(Please also complete Form VAT3)</i> | Authority: | <input type="checkbox"/> |
| Registered Company: | <input type="checkbox"/> | <i>(Please also complete form VAT 3)</i> | Association: | <input type="checkbox"/> |
| Branch/Division: | <input type="checkbox"/> | | Trust: | <input type="checkbox"/> |
| Other <i>(Please give details):</i> | <input type="checkbox"/> | | | |
| Compulsory Registration: | <input type="checkbox"/> | | Voluntary Registration: | <input type="checkbox"/> |

PART [II] PARTICULARS OF APPLICANT

| | | | | | | | | | | | | | |
|--|--|---|---|-------------|---|---|---|--------------------|---|---|---|---|--|
| 2. Registered Name <i>(if an individual, please state the Surname first)</i> | | | | | | | | | | | | | |
| 3. Trade Name <i>(if different from above)</i> | | | | | | | | | | | | | |
| 4. Postal Address | | | | | | | | | | | | | |
| 5. Physical Address | | | | | | | | | | | | | |
| 6. E-mail Address | | | | | | | | | | | | | |
| 7. Telephone Number | | | | | | | | | | | | | |
| 8. Cell Number | | | | | | | | | | | | | |
| 9. Fax Number | | | | | | | | | | | | | |
| Complete registration identity numbers that relate to your business | | | | | | | | | | | | | |
| 10. Sales Tax Number | | | | | | | | | | | | | |
| 11. Income Tax No. | | | | | | | | | | | | | |
| 12. Customs Assigned No. | | | | | | | | | | | | | |
| 13. Registration No. | | | | | | | | | | | | | |
| 14. Indicate whether you are <i>(tick all applicable)</i> Importer <input type="checkbox"/> Exporter <input type="checkbox"/> Agent <input type="checkbox"/> | | | | | | | | | | | | | |
| 15. Industry | | | | 15a. Sector | | | | 15b. Activity Code | | | | | |
| 16. Nature of Business | | | | | | | | | | | | | |
| 17. Date of Commencement of Trade | | D | D | / | M | M | / | Y | Y | Y | Y | | |
| 18. Effective Date of Registration | | D | D | / | M | M | / | Y | Y | Y | Y | | |
| 19. Number of Directors/Partners/Members/Individuals | | | | | | | | | | | | | |
| 20. If company is NOT wholly Zimbabwean owned, indicate percentage of foreign shareholding | | | | | | | | | | | | % | |

PART [III] BUSINESS INFORMATION

| Approximate figures for | Last 12 Months \$ | Next 12 Months \$ | For Office Use |
|-------------------------|-------------------|-------------------|----------------|
| 21. Taxable turnover | | | |
| 22. Exempt turnover | | | |
| 23. Value of exports | | | |
| 24. Value of imports | | | |

PART [IV] BRANCH / DIVISION / OTHER INFORMATION

| <i>List Below Particulars of Branches, Divisions or Other Businesses Associated with this Business</i> | |
|--|------------------|
| 25. Name of branch, division or business and VAT No. | Physical Address |
| | |
| | |
| | |
| | |

PART [V] PARTICULARS OF REPRESENTATIVE

| Public Officer <input type="checkbox"/> Liquidator <input type="checkbox"/> Executor <input type="checkbox"/> Administrator <input type="checkbox"/> Accountant/Bookkeeper <input type="checkbox"/> | |
|---|--|
| 26. Surname | |
| 27. First Names | |
| 28. Nat ID. Number | |
| 29. Physical Address | |
| 30. Postal Address | |
| 31. Cell Number | |
| 32. Telephone No. | |
| 33. E-Mail Address | |

PART [VI] BUSINESS ASSETS

| | Approximate Value \$ | For Office Use |
|---|----------------------|----------------|
| 34. Stocks of Materials for Manufacture or Goods for resale | | |
| 35. Motor Vehicles | | |
| 36. Furniture & Fittings | | |
| 37. Equipment | | |
| 38. Plant & Machinery | | |
| 39. Fixed Property | | |
| 40. Other (please specify) | | |

PART [VII] (i) DETAILS OF BANK ACCOUNT

| <i>The bank account must be in the name of the legal person or trading name.</i> | |
|--|------------|
| 41. Name of Bank | |
| 42. Branch Name | |
| 43. Name of Account Holder | |
| 44. Account Number | |
| 45. Type of Account | |
| <u>Confirmation of Bank Details (To be completed by the bank):</u> | |
| 46. Bank Official Name _____ | BANK STAMP |
| 47. Designation _____ | |
| 48. Signature _____ | |

PART [VII] (ii) DETAILS OF BANK ACCOUNT

| <i>The bank account must be in the name of the legal person or trading name.</i> | |
|--|------------|
| 49. Name of Bank | |
| 50. Branch Name | |
| 51. Name of Account Holder | |
| 52. Account Number | |
| 53. Type of Account | |
| <u>Confirmation of Bank Details (To be completed by the bank):</u> | |
| 54. Bank Official Name _____ | BANK STAMP |
| 55. Designation _____ | |
| 56. Signature _____ | |

PART [VII] (iii) DETAILS OF BANK ACCOUNT

| <i>The bank account must be in the name of the legal person or trading name.</i> | |
|--|------------|
| 57. Name of Bank | |
| 58. Branch Name | |
| 59. Name of Account Holder | |
| 60. Account Number | |
| 61. Type of Account | |
| <u>Confirmation of Bank Details (To be completed by the bank):</u> | |
| 62. Bank Official Name _____ | BANK STAMP |
| 63. Designation _____ | |
| 64. Signature _____ | |

PART [VIII] ATTACHMENTS

Submit the following information

Copy of certificate of Incorporation
Copy of memorandum & Articles of Association
Copy of current bank statement
Certified copy of your Identity Document

PART [IX] DECLARATION *(To be signed by a signatory to the bank account(s))*

I _____ *(full name)* hereby declare that the particulars given herein are correct and hereby apply for registration for Value Added Tax.

Designation _____

Signature _____

| | | | | | | | | | | |
|------|---|---|---|---|---|---|---|---|---|---|
| Date | D | D | / | M | M | / | Y | Y | Y | Y |
|------|---|---|---|---|---|---|---|---|---|---|

Warning: *It is a serious offence to provide false information.*

FOR OFFICIAL USE ONLY

Attachments Required

| | |
|---|--|
| Copy of certificate of Incorporation | Submitted / Not Submitted / Not Required |
| Copy of memorandum & Articles of Association | Submitted / Not Submitted / Not Required |
| Copy of current bank statement | Submitted / Not Submitted |
| Certified copy of your Identity Document | Submitted / Not Submitted |
| Other <i>(please specify)</i> _____ | |

Approval Regional Office

VAT Registration _____ Approved / Not Approved

Reason for refusal _____

Officer Name _____

Signature _____

Date

| | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|
| D | D | / | M | M | / | Y | Y | Y | Y |
|---|---|---|---|---|---|---|---|---|---|

OFFICE STAMP