



THE GUYANA REVENUE AUTHORITY

INTERNAL REVENUE

GPO BUILDING • ROBB STREET • GEORGETOWN

PHONE: 226-3189 • FAX: 225-5588

APPLICATION FORM

FOR ISSUE OF-- _____

1. Name of Applicant Mr. _____

BLOCK LETTERS Mrs. _____

Miss _____

2. Present Address: _____

3. Name and Address of Present or Last Employer _____

4. File Number (if you know your I.R.D # Please state here): _____

I hereby certify that the above particulars are true and correct according to my knowledge and belief.

SIGNATURE

DATE

FOR OFFICIAL USE ONLY

Filing Status _____

Date Submitted: _____

Returns Outstanding _____
