



FEDERAL INLAND REVENUE SERVICE

.....LTO/MTO/MSTO/IEITO/GBTO

.....STATE

FORM VAT 001

VAT REGISTRATION FORM

PART A: *To be completed by all VATable persons for VAT
The explanatory notes overleaf are part of the forms.*

1. (a) Name of VATable person (1).....
- (b) Place of Business (Not P.O. BOX) (2)
.....
.....
- (c) Telephone number and E-mail Address:.....
.....
- (d) Taxpayer Identification Number {3}.....
 Date of Incorporation/Registration:.....
2. (a) Nature of Business
 (i)
- (ii)
- (iii)
- (b) Types of Goods/Service {4}
 (i)
- (ii)
3. Date of Commencement of Business {5}

CERTIFICATION

Part B

I certify that the information given above is correct in all respects and confirm that to the beat of my Knowledge and belief there are no other facts the omission of which would be misleading.

.....
Signature of principal Officer
of VATable person (6)

.....
Official Stamp of the VATable person

.....
Full Name

.....
Designation

.....
Date