

ETI Reference:
Employer Number:
Linked Tax Reference:

NEW EMPLOYER REGISTRATION

This form is sufficient to register for both the ETI Scheme and Contributions

Please indicate whic	h type of employer you are by tick	ing the appropriate box:			
Limited Company	Business (Partnership) Business (Sole Trader)				
If you tick the following, you	should only register with the Reve	nue Services for Tax purposes:			
Domestic (Non-ETI)	Domestic (Tax)	Pension Scheme			
Directors Fees	R.A.T.S.				
Employer Details					
Employer Name/Limited Comp	pany Name:				
Trading as (if different from ab	pove):				
Company Registry Number (if	appropriate):				
Company Tax Reference (if ap	propriate): C				
Please provide details of beneficial owner(s) and shareholding:					
Date(s) of Birth (if Sole Trader or Business Partnership):					
Social Security Number(s) (if Sole Trader or Business Partnership):					
Tax Reference(s) (if Sole Trader or Business Partnership or Domestic):					
The nature of your business:					
Signature:	Date:				

Contact Details

Contact Name:					
Address:	E-r	E-mail:			
	E-r	nail for Annual Codin	gs (if different):		
Post code:					
Telephone Number(s):					
Payroll Details					
The date on which you start employing:					
Please provde the number of e	mploy	ees/annuitants paid:			
Weekly Monthly		Annua	lly (Tax only)		
Other (Tax only) Please specify:					
Do you wish to use:					
Returns Creator (https://rc.gov	<u>/.gg</u>)	Yes	No		
Third Party Software		Yes	No		
		Software Name:			
Fair Processing Notice: The Policy and Resources Committee will process any personal data which you provide, via this form, in accordance with the Data Protection (Bailiwick of Guernsey) Law, 2017. Further					
information about how your personal data is pro	cesse	d by the States of Gu	uernsey can be found at		
www.gov.gg/revenueservice, or alternatively you m	ay cor	tact us on 705700 and	request a paper copy.		
FOR OFFICE USE ONLY:					
Economic Code:					
Perry's Ref:		Survey/Area:			
Relevant Social Security and Tax References:					

Form 370a/EC14