



Registration of a Partnership

This form is for the use of all partnerships registering with the Revenue Service. A partnership must register by 14 July following the end of the first relevant calendar year it is required to file a return. For example, if a partnership is required to file a 2021 tax return, it should register by 14 July 2022.

All completed applications should be emailed to revenueservice@gov.gg with a subject header of "Partnership Registration".

1. PARTNERSHIP INFORMATION	
Partnership name	
Partnership type (e.g. General Partnership, Limited Partnership, Limited Liability Partnership, Other (please specify))	
Registration number (if applicable)	
Guernsey tax reference (if applicable)	
Jurisdiction of formation/registration	
Date of formation/registration	
Address	Post Office Box <i>(optional)</i>
	Suite <i>(optional)</i>
	Floor <i>(optional)</i>
	Building Name/Number
	Street
	City
	Country
	Post Code

1. PARTNERSHIP INFORMATION (continued)	
Nominated person with duty to deliver tax return	
Relationship to partnership (e.g. Partner, General Partner, Member, Other (please specify))	
Contact name	
Daytime telephone number	
E-mail Address	
Partnership Activities	
Economic Classification Code https://www.gov.gg/ecodes	
Accounting Year End	

2. CORPORATE SERVICE PROVIDER (CSP) DETAILS (if applicable)	
<i>If this application is made on behalf of the applicant, the CSP must have written authority to act on the applicant's behalf.</i>	
Is this application being made by a CSP? YES <input type="checkbox"/> NO <input type="checkbox"/>	
CSP's Business Name	
CSP Number (Registration number for completing online company returns)	

3. PROFESSIONAL ADVISOR (if applicable)	
<i>If this application is made on behalf of the applicant, the professional advisor must have written authority to act on the applicant's behalf.</i>	
Is this application being made by a professional advisor? YES <input type="checkbox"/> NO <input type="checkbox"/>	
If yes, please attach form 1012(a) [Form of Authority for professional advisor] which can be found at https://www.gov.gg/tax under "Other tax forms"	
Professional Advisor's Name	
Contact Number	
Email Address	

4. DECLARATION	
<i>The person signing this declaration should be fully aware of the circumstances of the partnership, and either hold an appropriate position in the applicant's business with sufficient authority to make the declaration or have authority to deal on the applicant's behalf.</i>	
I hereby declare that the information I have given in this application is correct and complete to the best of my knowledge and belief.	
Signature	Date
Printed Name	

FAIR PROCESSING NOTICE:
The information you have provided on this form is required under the Income Tax (Guernsey) Law, 1975 for the purposes of the assessment and collection of income tax. This information will be processed in line with the Data Protection (Bailiwick of Guernsey) Law, 2017. For full details of our Fair Processing Notice and how we look after your data please visit: https://www.gov.gg/revenueservice . If you don't have access to the internet please contact us and a paper copy will be provided.

FOR OFFICE USE ONLY:	
Has registration been completed? YES <input type="checkbox"/> NO <input type="checkbox"/>	
Tax Reference	
Partnership Notified of Reference? YES <input type="checkbox"/> NO <input type="checkbox"/>	
Date of First Form	
Comments	
Signature Date	

Form 715 (06/21)