

PROFILE UPDATING OF REGISTERED TAXPAYER –COMPANY

Please tick the appropriate cage that matches your option and if a question does not apply, write "N/A" in the relevant cage.

A. GENERAL INFORMATION

A.1	TIN	<table border="1" style="width: 100%; height: 20px; border-collapse: collapse;"> <tr> <td style="width: 12.5%;"></td> <td style="width: 12.5%;"></td> <td style="width: 12.5%;"></td> <td style="width: 12.5%;"></td> <td style="width: 12.5%;"></td> <td style="width: 12.5%;"></td> <td style="width: 12.5%;"></td> <td style="width: 12.5%;"></td> <td style="width: 12.5%;"></td> <td style="width: 12.5%;"></td> </tr> </table>										
A.2	Company Registration (ROC) No.	<table border="1" style="width: 100%; height: 20px; border-collapse: collapse;"> <tr> <td style="width: 100%;"></td> </tr> </table>										
A.3	Name of the Company	<table border="1" style="width: 100%; height: 20px; border-collapse: collapse;"> <tr> <td style="width: 100%;"></td> </tr> </table>										
	Name of the Company <i>(Sinhala/Tamil)</i>	<table border="1" style="width: 100%; height: 20px; border-collapse: collapse;"> <tr> <td style="width: 100%;"></td> </tr> </table>										
A.4	Company Type	<input type="checkbox"/> Private Limited (1982) <input type="checkbox"/> Private Limited (2007) <input type="checkbox"/> Limited <input type="checkbox"/> Guarantee Limited <input type="checkbox"/> Foreign (1982) <input type="checkbox"/> Foreign (2007) <input type="checkbox"/> Other										
	If Other, Please Specify:	<table border="1" style="width: 100%; height: 20px; border-collapse: collapse;"> <tr> <td style="width: 100%;"></td> </tr> </table>										

A.5	Date of Incorporation	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 12.5%; text-align: center;">Y</td> <td style="width: 12.5%; text-align: center;">Y</td> <td style="width: 12.5%; text-align: center;">Y</td> <td style="width: 12.5%; text-align: center;">Y</td> <td style="width: 12.5%; text-align: center;">M</td> <td style="width: 12.5%; text-align: center;">M</td> <td style="width: 12.5%; text-align: center;">D</td> <td style="width: 12.5%; text-align: center;">D</td> </tr> </table>	Y	Y	Y	Y	M	M	D	D
Y	Y	Y	Y	M	M	D	D			
A.6	Commencement date of the Business	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 12.5%; text-align: center;">Y</td> <td style="width: 12.5%; text-align: center;">Y</td> <td style="width: 12.5%; text-align: center;">Y</td> <td style="width: 12.5%; text-align: center;">Y</td> <td style="width: 12.5%; text-align: center;">M</td> <td style="width: 12.5%; text-align: center;">M</td> <td style="width: 12.5%; text-align: center;">D</td> <td style="width: 12.5%; text-align: center;">D</td> </tr> </table>	Y	Y	Y	Y	M	M	D	D
Y	Y	Y	Y	M	M	D	D			

Only for Foreign Company

Country of Origin

Date of incorporation in country of origin Date of commencement in country of origin

<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 12.5%; text-align: center;">Y</td> <td style="width: 12.5%; text-align: center;">Y</td> <td style="width: 12.5%; text-align: center;">Y</td> <td style="width: 12.5%; text-align: center;">Y</td> <td style="width: 12.5%; text-align: center;">M</td> <td style="width: 12.5%; text-align: center;">M</td> <td style="width: 12.5%; text-align: center;">D</td> <td style="width: 12.5%; text-align: center;">D</td> </tr> </table>	Y	Y	Y	Y	M	M	D	D	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 12.5%; text-align: center;">Y</td> <td style="width: 12.5%; text-align: center;">Y</td> <td style="width: 12.5%; text-align: center;">Y</td> <td style="width: 12.5%; text-align: center;">Y</td> <td style="width: 12.5%; text-align: center;">M</td> <td style="width: 12.5%; text-align: center;">M</td> <td style="width: 12.5%; text-align: center;">D</td> <td style="width: 12.5%; text-align: center;">D</td> </tr> </table>	Y	Y	Y	Y	M	M	D	D
Y	Y	Y	Y	M	M	D	D										
Y	Y	Y	Y	M	M	D	D										

A.7 Principal Activity of Business
(Please refer the IRD web portal)

Division		<div style="border: 1px solid black; padding: 5px;">Office Use Only: Principal Business Activity</div> <table border="1" style="width: 100%; height: 20px; border-collapse: collapse;"> <tr> <td style="width: 12.5%;"></td> <td style="width: 12.5%;"></td> <td style="width: 12.5%;"></td> <td style="width: 12.5%;"></td> <td style="width: 12.5%;"></td> <td style="width: 12.5%;"></td> </tr> </table>						
Group								
Activity								

A.8 Preferred Language
(All future correspondence will be in preferred language)

Sinhala Tamil English

A.9 Preferred Mode of Communication

Postal SMS Email

A.10 Website

A.11 BOI Registered Yes No

*If BOI Registered

A.11.1 BOI Exemption Start Date:

Y	Y	Y	Y	M	M	D	D
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A.11.2 BOI Exemption End Date

Y	Y	Y	Y	M	M	D	D
---	---	---	---	---	---	---	---

A.12 Bank Code (if company is a bank)

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B. GROUP COMPANY (ONLY FOR GROUP OF COMPANY)

B.1 If the company is a Subsidiary/Associate company

B.1.1 Holding Company is local or foreign? Local Foreign

B.1.2 Holding Company registration No. (TIN/ROC/Etc..)

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B.1.3 Name of Holding Company

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B.2 Address of Parent Company

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B.3 Country of Incorporation

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B.4 Date of Incorporation

Y	Y	Y	Y	M	M	D	D
---	---	---	---	---	---	---	---

C. REGISTERED ADDRESS (English)

C.1 Premises No.

--

 C.2 Unit No.

--

C.3

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C.4

--

C.5

--

 C.6 Postal Code

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REGISTERED ADDRESS (Sinhala / Tamil)

Premises No.

--

 Unit No.

--

--

--

--

 Postal Code

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Please fill in the following information regarding the address above as IRD requires these information for statistical purposes

C.7	Province		C.8	District	
C.9	Divisional Secretariat				
C.10	Grama Niladhari Division				

D. CONTACT NUMBERS

D.1	Mobile No. of the Contact Person																			
D.2	Official Telephone Number																			
D.3	Fax Number																			
D.4	Official Email Address																			
D.5	Name of Contact Person																			

E. BANK INFORMATION (Provide main Bank and account of the Company)

E.1	Bank Name																			
E.2	Account Number																			

F. DIRECTOR'S INFORMATION

* Please provide the Chairman's/Managing Director's information (for other directors, please fill in Appendix A)

F.1	NIC No.																			
F.2	TIN (if available)																			
F.3	Passport No.																			
F.4	Issuance Country of Passport																			
F.5	Name in Full																			
F.6	Salutation	<input type="checkbox"/> Mr. <input type="checkbox"/> Miss. <input type="checkbox"/> Dr. <input type="checkbox"/> Mrs. <input type="checkbox"/> Mdm. <input type="checkbox"/> Rev.																		
F.7	Name with Initials																			
F.8	Date of Birth	Y	Y	Y	Y	M	M	D	D											

F.9	Residential Address				
F.9.1	Premises No.		F.9.2	Unit No.	
F.9.3					
F.9.4					
F.9.5		F.9.6	Postal Code		

F.10	Mobile Number										
F.11	Office Telephone Number										
F.12	Home Number										
F.13	E-Mail Address										

G. DECLARATION

I do hereby certify that the particulars furnished by me in this application are true and correct.

Name of the authorized person	
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National Identity Card No.	
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Designation	
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.....
Signature and Stamp

.....
Date

Note: This form should be submitted along with supporting documents (if any) to the relevant Unit or Branch of IRD.

FOR OFFICE USE ONLY

Principal Business Activity Code	
All relevant documents are submitted	Yes / No
Officer's Name and Signature	
Date :	

Appendix A

Fill one copy for each director

NIC No.										
TIN (if available)										
Passport No										
Issuance Country of Passport										

Name in Full																				

Salutation	<input type="checkbox"/> Mr.	<input type="checkbox"/> Miss.	<input type="checkbox"/> Dr.
	<input type="checkbox"/> Mrs.	<input type="checkbox"/> Mdm.	<input type="checkbox"/> Rev.

Name with Initials																				

Date of Birth	Y	Y	Y	Y	M	M	D	D
---------------	---	---	---	---	---	---	---	---

Residential Address			
Premises No.		Unit No.	
	Postal Code		

Mobile Number										
Office Telephone Number										
Home Number										
E-Mail Address										