

Application Form for Tax Clearance (Outward Remittances)

Registration Number

1

<p><u>Details of Remitter</u></p> <p>Local Company Name - -</p> <p>.....</p> <p>Address -</p> <p>.....</p> <p>TIN -</p>	<p><u>Details of Recipient</u></p> <p>Foreign Company Name -</p> <p>.....</p> <p>Country -</p> <p>Tax File Number (If Available)</p> <table style="width: 100%; border: none;"> <tr> <td style="border: 1px solid black; padding: 2px; text-align: center;">13/.....</td> <td style="border: 1px solid black; padding: 2px; text-align: center;">13/IND/.....</td> <td style="border: 1px solid black; padding: 2px; text-align: center;">13/P/.....</td> </tr> </table>	13/.....	13/IND/.....	13/P/.....
13/.....	13/IND/.....	13/P/.....		

2

Details of Remittance

Nature of Remittance -

.....

Invoice Numbers -

Total Invoice Value	Remittance Amount	Currency

3

Tax Calculation (Applicable for Tax Liable cases Only)

<p>• If Net Amount Remit</p> <table style="width: 100%; border: none; margin-top: 10px;"> <tr> <td style="border: 1px solid black; width: 20%;"></td> <td style="text-align: center; font-size: 2em;">X</td> <td style="text-align: center;"> <table style="border: none;"> <tr> <td style="border: 1px solid black; width: 40px; height: 20px;"></td> <td style="text-align: center;">(Applicable Tax Rate)</td> </tr> <tr> <td colspan="2" style="text-align: center; border: none;">100</td> </tr> </table> </td> </tr> <tr> <td style="text-align: center; font-size: 0.8em;">(Invoice Amount)</td> <td></td> <td></td> </tr> </table> <p>Currency <input style="width: 40px;" type="text"/> Tax Amount <input style="width: 150px;" type="text"/></p>		X	<table style="border: none;"> <tr> <td style="border: 1px solid black; width: 40px; height: 20px;"></td> <td style="text-align: center;">(Applicable Tax Rate)</td> </tr> <tr> <td colspan="2" style="text-align: center; border: none;">100</td> </tr> </table>		(Applicable Tax Rate)	100		(Invoice Amount)			<p>• If Gross Amount Remit</p> <table style="width: 100%; border: none; margin-top: 10px;"> <tr> <td style="border: 1px solid black; width: 20%;"></td> <td style="text-align: center; font-size: 2em;">X</td> <td style="text-align: center;"> <table style="border: none;"> <tr> <td style="border: 1px solid black; width: 40px; height: 20px;"></td> <td style="text-align: center;">(Applicable Tax Rate)</td> </tr> <tr> <td colspan="2" style="text-align: center; border: none;">100 - <input style="width: 40px;" type="text"/></td> </tr> <tr> <td colspan="2" style="text-align: center; border: none;">(Applicable Tax Rate)</td> </tr> </table> </td> </tr> <tr> <td style="text-align: center; font-size: 0.8em;">(Invoice Amount)</td> <td></td> <td></td> </tr> </table> <p>Currency <input style="width: 40px;" type="text"/> Tax Amount <input style="width: 150px;" type="text"/></p>		X	<table style="border: none;"> <tr> <td style="border: 1px solid black; width: 40px; height: 20px;"></td> <td style="text-align: center;">(Applicable Tax Rate)</td> </tr> <tr> <td colspan="2" style="text-align: center; border: none;">100 - <input style="width: 40px;" type="text"/></td> </tr> <tr> <td colspan="2" style="text-align: center; border: none;">(Applicable Tax Rate)</td> </tr> </table>		(Applicable Tax Rate)	100 - <input style="width: 40px;" type="text"/>		(Applicable Tax Rate)		(Invoice Amount)		
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(Invoice Amount)																							

Applicable Exchange Rate & Date			Tax Paid Amount (LKR)	
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4

Remarks (If available) -

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❖ Please attach Copy of Invoices, Copy of Agreement (If Available) & Copy of paying-in-slip

Name -

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Authorized Signature

Designation & Contact Number -

For Office Use Only

Officer Name

Signature

Direction -

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