



**DEPARTMENT OF INLAND REVENUE
BARBADOS**

APPLICATION FOR INDIVIDUAL INCOME TAX ACCOUNT NUMBER

Name:
First Initial Last

National Registration Number/

National Insurance Number:

Home Address:

Mailing Address
if different from above)

E-mail Address:

Web Site:

Contact No(s):

Trade or Business Name:

Location of Business:

Nature of Business:

Date Business Commenced:

.....
Signature of Applicant Date:/...../.....
YYYY MM DD

FOR OFFICIAL USE

I herby certify that Tax Account Number has been assigned to the individual named above for use when transacting business with this Department.

.....
for Commissioner of Inland Revenue Date Approved: