



Tax	ClearanceCertific	ate Application Form	1		
_	ndividual Taxpayer			Quote your FCT-IRS TIN here	1
Please complete this form in CAPITAL letters					
PART ONE: PERSONAL INFORM	IATION		ı		Í
First Name		Middle Name		Surname	
Employer/Self Employed					
Residential Address	1	1			
_	House/Plot No.		Street/Ave	enue/Road or Others	
	1		I		
Town/District		Area Council	I	FCT	
			11		
Nationality		Occupation/Profession	1	Contact Telephone No(s).
e-mail					
PART TWO: STATEMENT OF INC	COME FOR THE THRE	EE PRECEDING YEARS			
	ASSESSME	ENT YEAR	2021	2022	2023
 Trade, Business, Profession, Vo. Attach copies of Accounts for the Year B 	cation etc Ended 31st December 20	N			
(ii) Employment:					
Salary/Wages N					
					
Allowances Attach details of each allowances paid of	on your behalf)	N			
(iii) Pension From		N			
Annulty From N					
•					
Gratuities N (State name and address of the payer)					
(iv) Income received in or brought into Nigeria N					
from all sources outside NigeriaN					
(v) Dividends from Nigerian Compa	nies	N			
Dividends from outside the Cour		N			
(Enter the gross amount before tax dedution) Interest		N			
(Attach a list giving details of each source gross income received therefrom)					
(vii Rents	the amount of gross and	N			
(vii Income in respect of other profits arising					
(Attach details of each source and the in		IV		 -	
TOTA	AL INCOME INCOME	N			
Less		N			
	-	N			
		N			
GROS	SS INCOME (NET)	N			
Less	Consolidated tax-relief				
	of Gross Income, which	never is higher N			
	Plus 20% ofgross Incon	ne N			
Taxat Apply	ble/Chargeable Income . y related tax rates	N			
Tax [Due/Payable	N			
Data of Application			Oinceton of T		
Date of Application			Signature of Taxpayer		