



Tax Clearance Certificate Application Form

For Enterprise/Business Name

Please complete this form in CAPITAL letters

SECTION ONE: DETAILS OF ENTERPRISE/BUSINESS NAME

FCT-IRS TIN

Business Name _____

DD / MM / YY

Date of Registration

Business Number (BN)

Nature Of Service/Business

Business Address:

House/Plot No. _____ Street/Avenue/Road or Others _____

Town/District _____ Area Council _____ FCT _____

Name of Business Owner/Partner _____ Contact Telephone No(s) _____

e-mail _____

SECTION TWO: STATEMENT OF INCOME FOR THE THREE PRECEDING YEARS

ASSESSMENT YEAR	2016	2017	2018
(i) Partnerships: Venture, Share, Gain etc	N _____	_____	_____
(ii) Business Income	N _____	_____	_____
(iii) Rent	N _____	_____	_____
(iv) Income received in or brought into Nigeria from all sources outside Nigeria	N _____	_____	_____
(v) Dividends from Nigerian Companies	N _____	_____	_____
Dividends from outside the Country	N _____	_____	_____
(Enter the gross amount before tax deduction)			
(vi) Interest	N _____	_____	_____
(Attach a list giving details of each source and the gross income received therefrom)			
(vii) Income in respect of other profits arising from sources not included above	N _____	_____	_____
(Attach details of each source and the income therefrom)			
TOTAL ANNUAL TURNOVER	N _____	_____	_____
Less:			
- Total Expenses	N _____	_____	_____
GROSS INCOME	N _____	_____	_____
Less:			
- Consolidated tax-relief of N200,000 or 1% of Gross Income, which ever is higher	N _____	_____	_____
- Plus 20% of Gross Income	N _____	_____	_____
- Others	N _____	_____	_____
Taxable/Chargeable Income	N _____	_____	_____
Apply related tax rates			
Tax Due/Payable	N _____	_____	_____

Date _____

Signature of Taxpayer _____