

**TAX RESIDENCY CERTIFICATE REQUEST AND
QUESTIONNAIRE FOR LEGAL ENTITIES**



ΤΜΗΜΑ
ΦΟΡΟΛΟΓΙΑΣ
TAX DEPARTMENT

A COMPANY DETAILS

Tax Payer Identification Code:		Telephone Number	
Company Name:			
Registered Office Address:			
Mailing Address (If different from above):			

B TAX RESIDENCY CERTIFICATE DETAILS

Period/Year for which certificate is required:	
Country for which certificate is required*:	
* Attach the other country specific tax residency form, fully completed, where required	

C QUESTIONNAIRE

1 COMPANY INCORPORATION AND TAX RESIDENCE	Yes	No
1.1 Is the company incorporated in Cyprus?		
- If not state the country of incorporation		
1.2 Is the company tax resident ONLY in Cyprus?		
- If No Specify the other jurisdiction		
and provide possible documentation from the other jurisdiction.		

2 DIRECTORS/BOARD MEETINGS	Yes	No
2.1 Do the majority of the Board of Directors meetings take place in Cyprus?		
2.2 Does the Board of Directors exercise control and make key management and commercial decisions necessary for the company's operations and general policies?		
2.3 Are Board of Directors' minutes prepared and kept in Cyprus?		
2.4 Is the majority of the Board of Directors tax residents in Cyprus?		
- Please attach latest Board of Directors Certificate		

3 SHAREHOLDER MEETINGS	Yes	No
3.1 Do shareholders' meetings take place in Cyprus?		

4 POWERS OF ATTORNEY	Yes	No
4.1 Has the company issued any General Powers of Attorney?		
- If Yes, please specify the Terms and Conditions thereof:		

5 MAINTENANCE OF BOOKS AND RECORDS	Yes	No
5.1 Are the corporate seal and all statutory books and records maintained in Cyprus?		
5.2 Are corporate filing and reporting functions performed by representatives located in Cyprus?		
5.3 Are agreements relating to the company's business or assets executed or signed in Cyprus?		

6 TAX FILINGS AND PAYMENTS	Yes	No
6.1 Have all the tax returns (T.D.4/I.R.4) that are due, been filed?		
6.2 Have all the self-assessments for the tax years that are due, been paid?		

7 CONFIRMATION	
I, being fully aware that any incorrect or false declaration is a criminal offence according to the provisions of the Assessment and Collection of Taxes Law, Law 4 of 1978 as amended, hereby confirm that the particulars and information given in this Request are true and correct and that the management and control of the applicant is exercised in Cyprus.	
Directors' Signature	_____
Directors' Name	_____
Directors' TN/TIC	_____
Date	_____

Instructions

1. Print this form on one (1) sheet of paper.
2. This form must be submitted to the District Office where the tax file of the applicant company is located.