



Government of Tonga

FORM 2/FOOMU 2
INDIVIDUAL/SOLE TRADER TAXPAYER IDENTIFICATION NUMBER (TIN)
REGISTRATION FORM/FOOMU KI HE LESISITA FIKA TUKUHAU
TAAUTAHA/PISINISI

Ministry of Revenue & Customs

QSC Ex-Student Center, Railway Road, Nuku'alofa, TONGA

Telephone (676)7400550 Fax (676) 25018

REVENUE SERVICES ADMINISTRATION ACT 2021/LAO KI HONO PULE'I 'O E NGA'HI NGAUE
TANAKI PA'ANGA 2021

Regulation 3(1)(a)(ii)

Tu'utu'uni 3(1)(a)(ii)

PLEASE PRINT/KATAKI 'O TOHI FAKAMATALALAHI

- YOU OWN AND OPERATE A BUSINESS OR ARE A CASUAL WORKER OR CONSULTANT BUT NOT AS A COMPANY; AND
- ALSO IF IN ADDITION TO YOUR BUSINESS YOU ALSO HAVE PAID EMPLOYMENT/NGAUE'AKI 'A E FOOMU KO 'ENI KAPAU 'OKU KE FAKALELE HA PISINISI KA 'OKU 'IKAI KO HA KAUTAHA TATAU AI PE PE 'OKU KE TOE MA'U VAHENGANGAUE TAXPAYER DETAILS/NGA'HI FAKAMATALA FEKAU'AKI MO E TOKOTAHA TUKUHAU

TAXPAYER DETAILS/NGA'HI FAKAMATALA FEKAU'AKI MO E TOKOTAHA TUKUHAU	
1. Language/Lea	<input type="checkbox"/> ENGLISH <input type="checkbox"/> FAKATONGA
2. Name /Hingoa	<input type="checkbox"/> MR <input type="checkbox"/> MRS <input type="checkbox"/> MS <input type="checkbox"/> MISS <input type="checkbox"/> OTHER(KEHE) Any other names used/Hingoa kehe 'oku ngaue'aki: _____
3. Date of birth/'Aho fa'ele'i	
4. Trading Name/ Hingoa 'o e Pisinisi kapau 'oku 'i ai	<input type="checkbox"/> Yes/'lo _____ <input type="checkbox"/> No/'Ikai
5. Effective Date of Business License / 'Aho na'e laiseni ai 'a e pisinisi	
6. Business Commencement Date/ 'Aho kamata 'a e pisinisi	
7. (a) Resident for tax/ Totongi Tuku'au 'i Tonga (b) If No please attach your Business Visa/Kapau 'Ikai pea fakapipiki mai ho'o pisinisi visa	<input type="checkbox"/> Yes/'lo <input type="checkbox"/> No/'Ikai
8. Tax Agent/ Fakafofonga Tuku'au	
9. Bank Details/ Fika 'akauni pangike	Account name/ Hingoa e 'akauni: _____ Bank/ Pangike: _____ Bank Account Number/ Fika 'Akauni: _____
BUSINESS CONTACT DETAILS	
10. Physical Address / Tu'asila Contact Number / Fika fetu'utaki P.O BOX / Puha Meili Email Address / 'Imeili	Business Location/Tu'u'anga 'o e Pisinisi: _____ Village/ Kolo: _____ Island/ Motu: _____ Business phone Number/ Telefoni Ngaue'anga _____ Mobile/Mopaila: _____ _____ _____
ADDITIONAL DETAILS/ NGA'HI FAKAMATALA MAKEHE	
11. Please attach a copy of your ID and business license/ Kataki 'o Fakahu mai mo ho'o ID mo e laiseni pisinisi.	Type of ID/ Kalasi 'o e ID We accept National ID card, Passport, Birth certificate, Statement from your birth parent(s) or adopted parent(s) or a person who has known you for at least 5 yrs

<p>12. Please tick tax type appropriate to your business/ <i>Tiki e puha 'oku kaungatonu kiai ho pisinisi.</i></p>	<ul style="list-style-type: none"> <input type="checkbox"/> Income Tax/ Tukupau Pa'anga Hu Mai Effective date/ 'Aho kamata ai _____ <input type="checkbox"/> Income Tax/ Tukupau Pa'anga Hu Mai Effective date/ 'Aho kamata ai _____ <input type="checkbox"/> PAYE/ Tukupau Ta'ofi Vahenga Effective date/ 'Aho kamata ai _____ <input type="checkbox"/> Withholding Tax/ Tukupau Ta'ofi Effective date/ 'Aho kamata ai _____ <input type="checkbox"/> Withholding tax non-resident/ Tukupau Ta'ofi Vahenga 'ikai nofo fonua Effective date/ 'Aho kamata ai _____
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DECLARATION

I declare that the information given on this form is true and correct/'Oku ou fakahako e fakamatala 'oku 'oatu 'I he foomu ni 'oku mo'oni mo totonu.

Signature/*Fakamo'oni* _____ Date/'Aho _____