Application for registration as a Taxpayer or Changing of Registered Particulars: Trust

IT77TR

TPINF01

Taxpayer Information

Taxpayer ref. no.

Area code

- Where registered details have changed, the applicant must only fill in the taxpayer reference number and the details that have changed
- Use capital letters and where applicable, mark with an "X"

Trust Details

Registered name

Registration no.

Registration date (CCYYMMDD)

Bus tel. no.

Fax no.

Cell no.

Nature of business

Email address

Registered Address

Unit no.

Complex (if applicable)

Street no.

Street / Farm name

Suburb / District

City / Town

Country code (e.g. South Africa = ZA)

Postal Code

Postal Address

Mark here with an "X" if same as above or complete your Postal Address

Country code (e.g. South Africa = ZA)

Postal Code

Trust Types

Intervivos

Vested

Discretionary

Voluntary Disclosure Programme

Is this declaration made in respect of a VDP agreement with SARS? Y N

VDP Application No.

Declaration

I declare that the information furnished in this application is true, correct and complete.

XXXXXXXXXXXXXXXXXXXX
XXXXXXXXXXXXXXXXXXXX

Please ensure you sign over the 2 lines of "X"s above

Date (CCYYMMDD)

For enquiries go to www.sars.gov.za or call 0800 00 SARS (7277)

Bank Account Details

All changes will be verified before your banking details are updated. SARS will notify you if you are required to visit a SARS branch to present supporting information. Bank account details are required for refunds.

BNKIF01

Mark here if you do not have a local bank account

Account No.

Branch No.

Account Type: Current Savings Transmission

Bank Name

Branch Name

Account Holder Name (as registered at bank)

Taxpayer Representative Details

PODIF01

Surname

Initials

First two names

Taxpayer ref. no.

ID No.

Date of Birth (CCYYMMDD)

Passport No.

Passport Country (e.g. South Africa = ZAF)

Home tel no.

Bus tel no.

Passport issue date (CCYYMMDD)

Cell no.

Fax no.

Date of Appointment (CCYYMMDD)

Email Address

Physical Address

Unit No.

Complex (if applicable)

Street No.

Street / Farm name

Suburb / District

City / Town

Country code (e.g. South Africa = ZA)

Postal Code

Tax Practitioner Details (if applicable)

TPDIF01

Surname / Registered name

Initials (if applicable)

Registration No.

Tel No.

Contact Email

Trading Details

TDINF01

Is theTrust trading? Y N

Financial year end (MM)

If 'Yes', will the trust be liable for provisional tax? Y N

Three Main Partners Details (Only in case of partnership)

MPDIF01

Number One

Surname

Taxpayer ref no.

Initials

ID No.

Passport No.

Passport Country (e.g. South Africa = ZAF)

Number Two

Surname

Taxpayer ref no.

Initials

ID No.

Passport No.

Passport Country (e.g. South Africa = ZAF)

Number Three

Surname

Taxpayer ref no.

Initials

ID No.

Passport No.

Passport Country (e.g. South Africa = ZAF)

Trustee's Details

MTRIF01

Main Trustee

Surname

Initials

ID No.

Date of Birth (CCYYMMDD)

Passport No.

Passport Country (e.g. South Africa = ZAF)

Passport issue date (CCYYMMDD)

Taxpayer ref.no.

Physical Address

Unit No.

Complex (if applicable)

Street No.

Street / Farm name

Suburb / District

City / Town

Country code (e.g. South Africa = ZA)

Postal Code

Contact Numbers

Bus Tel No.

Fax No.

Cell No.

Two Other Trustees Details

OTRIF01

Surname

Initials

ID No.

Date of Birth (CCYYMMDD)

Passport No.

Passport Country (e.g. South Africa = ZAF)

Passport issue date (CCYYMMDD)

Taxpayer ref.no.

Physical Address

Unit No.

Complex (if applicable)

Street No.

Street / Farm name

Suburb / District

City / Town

Country code (e.g. South Africa = ZA)

Postal Code

Contact Numbers

Bus Tel No.

Fax No.

Cell No.

Two Other Trustees Details (Continued)

OTRIF01

Surname

Initials

ID No.

Date of Birth (CCYYMMDD)

Passport No.

Passport Country (e.g. South Africa = ZAF)

Passport issue date (CCYYMMDD)

Taxpayer ref.no.

Physical Address

Unit No.

Complex (if applicable)

Street No.

Street / Farm name

Suburb / District

City / Town

Country code (e.g. South Africa = ZA)

Postal Code

Contact Numbers

Bus Tel No.

Fax No.

Cell No.

Estate Details

Type of Estate	Effective Date (CCYYMMDD)
Voluntary liquidation	
Involuntary liquidation	
Other: Specify	

Meeting Dates for Insolvent Estates

First meeting CCYYMMDD

Second meeting (CCYYMMDD)

Special meeting (CCYYMMDD)

Representative Taxpayer Details

Surname

Initials

First two names

Taxpayer ref. no.

ID No.

Date of Birth (CCYYMMDD)

Passport No.

Passport Country (e.g. South Africa = ZAF)

Home tel no.

Bus tel no.

Passport issue date (CCYYMMDD)

Cell no.

Fax no.

Date of Appointment (CCYYMMDD)

Email Address

Physical Address

Unit No.

Complex (if applicable)

Street No.

Street / Farm name

Suburb / District

City / Town

Country code (e.g. South Africa = ZA)

Postal Code

Contact Numbers

Tel No.

Cell No.

Fax No.

Postal Address

Mark here with an "X" if same as above or complete your Postal Address

Country code (e.g. South Africa = ZA)

Postal Code

Capacity of Representative

Liquidator

Administrator

Other (Specify)

For Office Use Only

RQINF01

Initial year of liability

Current financial year end

Taxpayer Sub-Category

Normal

Intervivos

Mortis Causa

Special Trust

Exempt Institution

Taxpayer Type

Non-Provisional

Provisional

Suspense Code

Dormant

Suspense Effective Date (CCYYMMDD)

Information Required for Registration / Change of Registered Particulars

FOINF01

The following information is required in order for SARS to process your application. Your application may be rejected where the required information has not been submitted.

Application Form
This IT77TR form must be completed in full and signed by the representative taxpayer.

Proof of identity of Representative Taxpayer
A certified legible copy of the representative taxpayer's identity document or passport or driving licence must be submitted.

Provide a copy of the Trust deed, will or similar document