



MALAWI REVENUE AUTHORITY **DOMESTIC TAX DIVISION REGISTRATION OF EMPLOYEE**

EMPLOYEE DETAILS

ETIN(if any):										
JRNAMEINITIALS:										
OTHER NAMES										
DATE OF BIRTH										
POSTAL ADDRESS										
HOME ADDRESS: V/G	T/A				DISTI	RICT:				
MARITAL STATUS CAPACITY EMPLOYED										
EMPLOYMENT DETAIL	_S									
GROSS SALARY:										
DATE OF APPOINTMENT										
OTHER CASH BENEF	ITS									
EMPLOYER DETAILS										
TPIN:										
NAME OF EMPLOYER										
POSTAL ADDRESS										
TELEPHONE NO: CELL NO.										
E-MAIL I declare that the information given above is correct and complete.										
Date Employer/Employer's Representative										