



MALAWI REVENUE AUTHORITY

WITHHOLDING TAX REGISTRATION FORM

1. Name of Operator
- Trade name
- Operators Taxpayer identification Number (TPIN)
2. Physical address
-
3. Postal address
-
4. Business Tel No: Cell No: Fax No:.....
5. Employer's Representative:
6.
 - (a) Name (in full)
 - (b) Address
7. Specified payments to Withhold Tax from (Tick as appropriate)
 - (a) Royalties
 - (b) Rent
 - (c) Supplies (i) Food stuff
 - (ii)Others
 - (d) Fees
 - (e) Commissions
 - (f) Carriage and Haulage
 - (g) Tobacco and other Products
 - (h) Contractors and Subcontractors
 - (i) Public Entertainment
 - (j) Casual Labour or services
 - (k) Bank interest

DATE:

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Signature of employer's representative