VAT-002
July 2009

Grenada
INLAND REVENUE DIVISION

Value Added Tax (VAT)
Application to Change Registration Details or Cancel Registration

CHANGE OF REGISTRATION

Reason for change of registration:

CURRENT DATA

Name of Taxpayer

Trade Name of Taxpayer

Establishment Name

Address

Mailing Address

Telephone Number

Fax Number

Email Address

Taxpayer Identification Number (TIN)

NEW DATA

Name of Taxpayer

Trade Name of Taxpayer

Establishment Name

Address

Mailing Address

Telephone Number

Fax Number

Email Address

Please tick here if there are other changes required and attach a sheet with details to this form

CANCELLATION OF REGISTRATION (DEREGISTRATION)

Name of Taxpayer

Trade Name of Taxpayer

Address (of business)

Mailing Address

Telephone Number

Fax Number

Taxpayer Identification Number

Email Address

Reason for application for cancellation (tick one)

Cessation of business

Sale of business as a going concern

Other

Effective date of cancellation

Day Month Year

Value of stock on hand

Value of assets on hand

DECLARATION

I _____ hereby declare that the information given on this application form is true, correct and complete.

Signature

Title

Date

Day Month Year

FOR INLAND REVENUE USE ONLY

Received

Day Month Year

Effective date

Day Month Year

Approved by

Position

Date

Document Number