

## Application for Registration – Insurance

Client ID\*

*\*If you are already registered with Revenue NSW for another tax or duty, use your existing Client ID.*

### Type of registration

What type of registration are you applying for?

An insurer (as described in Section 247 of the *Duties Act 1997*)

General insurance with non-registered insurer (as described in Section 236 of the *Duties Act 1997*)

Life insurance with non-registered insurer (as described in Section 245 of the *Duties Act 1997*)

### Client name

#### Business

The business is a:

Company/ies	Partnership	Other
Company/Partnership name		
Trading name		
ABN/ACN		

**Address details – Note:** You will not be registered unless this section has been completed.

**Postal address** (All correspondence will be sent to this address)

Care of		
Building name		Floor number
Unit number	Suite	
Street number	Street name	
Suburb/Town	State	Postcode
GPO/PO Box number	Suburb	Postcode

## Business address

**Note:** If your business address is the same as your postal address enter 'as above' in the box below.

Care of		
Building name		Floor number
Unit number	Suite	
Street number	Street name	
Suburb/Town	State	Postcode

## Address for inspection of records

**Note:** If this address is the same as that stated in either the postal or business address sections, please advise that here.

Care of		
Building name		Floor number
Unit number	Suite	
Street number	Street name	
Suburb/Town	State	Postcode

## Contact details for enquiries

Mr	Ms	Miss	Mrs	First name
Last name				
Position in organisation				
Daytime phone number (    )				
Mobile		Email		

When did you first become an insurer under the Act?	DD/MM/YYYY
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## Declaration

I declare that all information provided is true and correct in every particular.

I,		
declared at	on	DD/MM/YYYY

## Third Party declaration

**Note:** An insurance intermediary can apply to pay duty as if the intermediary is a registered insurer.

If the applicant is acting on behalf of insured persons who are liable to pay duty under section 236 or section 245 of the *Duties Act 1997* (insurance that is effected or renewed with a person who is not a registered insurer), this application is made under section 37 of the *Taxation Administration Act 1996*.

## Declaration

I hereby apply to lodge returns and pay duty on the same basis as a registered insurer under Part 3 of Chapter 8 of the *Duties Act 1997*.

I,		
declared at	on	DD/MM/YYYY

## EFT details

These details will be used if a refund is payable.



Account name	
Financial institution	Branch
BSB number	Account number


### Privacy statement

Information collected from you on this form is required by Revenue NSW to determine if you have a liability or entitlement. The information may be provided to third parties with your consent or as required or permitted by law. Revenue NSW will correct or update your personal information at your request. Read more about privacy at [www.revenue.nsw.gov.au](http://www.revenue.nsw.gov.au)

### Contact details

 1300 139 817\* (Monday–Friday, 8.30 am–5.00 pm) \*Interstate clients please call (02) 7808 6915

 [www.revenue.nsw.gov.au](http://www.revenue.nsw.gov.au)  [returns@revenue.nsw.gov.au](mailto:returns@revenue.nsw.gov.au)  Help in community languages is available

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