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Republic of Somaliland
Ministry of Finance Development
Inland Revenue Department



TAXPAYER DATA CHANGE OR DE-REGISTRATION FORM

This form is used for modifying taxpayer registration details or cancelling tax registration in accordance with the provisions of section 158(10) & (11) and 169(8) & (9) of the Revenue Act (Law No. 72/2016) and of Regulations 26(1) & 27(1) of the Revenue Act Regulations 2017

Section A: Taxpayer's Details

A1	Taxpayer's Full Name			
A2	Trade Name (if different to Taxpayer's Name)		A3.TIN	
A4	Business Address (District)		A5. Village	
A6	Mobile Phone Number		A7. Email Address	

Section B: Reason for Modification		Yes or No		Suggested amendment/modifications
B1	Change in taxpayer's name. Attach copy of national identity card or passport	Yes <input type="checkbox"/>	No <input type="checkbox"/>	
B2	Change in business address, email or phone no.	Yes <input type="checkbox"/>	No <input type="checkbox"/>	
B3	Change of legal representative	Yes <input type="checkbox"/>	No <input type="checkbox"/>	
B4	Change in business activities	Yes <input type="checkbox"/>	No <input type="checkbox"/>	
B5	Change in registered name/trade name	Yes <input type="checkbox"/>	No <input type="checkbox"/>	
B6	Change in tax type details (which taxes paid)	Yes <input type="checkbox"/>	No <input type="checkbox"/>	
B7	Change in business entity type	Yes <input type="checkbox"/>	No <input type="checkbox"/>	
B8	Other (Not listed above)	Yes <input type="checkbox"/>	No <input type="checkbox"/>	

Section C : De-registration reasons		Yes or No		Date of cessation/ending date
Please attach letters from Chamber of Commerce and MOTIT regarding cessation of business)				
C1	Permanent closure	Yes <input type="checkbox"/>	No <input type="checkbox"/>	
C2	Dissolution of the entity	Yes <input type="checkbox"/>	No <input type="checkbox"/>	
C3	Merger or consolidation	Yes <input type="checkbox"/>	No <input type="checkbox"/>	
C4	Death (Individual)	Yes <input type="checkbox"/>	No <input type="checkbox"/>	
C5	Others (specify)	Yes <input type="checkbox"/>	No <input type="checkbox"/>	

Section D: Certification				
I declare that the information provided in this form is correct & complete				
D1	Name of taxpayer or representative		D2	Role
D3	Signature & stamp		D4	Date

Section E: Space reserved for Inland Revenue Department (IRD)				
Documents received (They have to be kept in the taxpayer's physical file)				
E1	Copy of National Identity Card or Copy of Passport (If not resident)	Yes <input type="checkbox"/>	No <input type="checkbox"/>	
E2	Copy of Trade License	Yes <input type="checkbox"/>	No <input type="checkbox"/>	
E3	Cancellation letter from the Ministry of Trade, Industry & Tourism	Yes <input type="checkbox"/>	No <input type="checkbox"/>	
E4	Articles of Association or other documents showing change of business entity type	Yes <input type="checkbox"/>	No <input type="checkbox"/>	
E5	Tax Clearance Certificate	Yes <input type="checkbox"/>	No <input type="checkbox"/>	

Responsible Officers	Name	Signature and stamp	Date
E6	Received by registration officer:		
E7	Validated & Approved by head of registration unit:		

Guidelines for completing taxpayer data change or de-registration form May 2020

This form is used for both modifying taxpayer registration details or cancellation of tax registration in accordance with the provisions of sections 158(10) & (11) and 169(8) & (9) of the Revenue Act (Law No. 72/2016) and of Regulations 26(1) & 27(1) of the Revenue Act Regulations 2017. In case you need further information please contact the Taxpayer Registration Office at IRD HQ or contact your local IRD tax office.

Section A: Taxpayer's details

A1- Taxpayer's full name: Enter your name in this box as provided in your taxpayer registration certificate or your current name if different

A2- Business trade name: Enter in this box your business trade name as provided during your tax registration or the current business trade name if different from that provided previously

A3- TIN (Taxpayer Identification Number): Enter your taxpayer identification number in this box

A4- Business address – Enter in this box your current business address if changed

A5- Village: Enter in the box the name of the village where your business is located if changed

A6- Mobile phone number: Enter in this box your business telephone number

A7- E-mail address: Enter in this box your e-mail address

Section B: Reason for modification

B1- Change in taxpayer's name: Tick Yes if you want to modify your name in IRD's records

B2- Change in business address, email or phone number: Tick Yes if you want to modify your business address, email or phone number

B3- Change of legal representative: Tick Yes if you want to modify your legal representative

B4- Change in business activities: Tick Yes if you want to modify your business activities data

B5- Change in registered name/trade name: Tick Yes if you want to modify business trade name

B6- Change in tax type details: Tick Yes if you want to modify details of tax types you are liable for

B7- Change in business entity type: Tick Yes if you want to modify your tax entity type

B8- Other (Not listed above): Tick Yes if you want to modify any other data in IRD's records

If you made any of these changes, provide details of the change. Attach details if more space needed.

Section C : De-registration reasons

Note: Attach letters from Chamber of Commerce and Ministry of Trade, Industry & Tourism regarding cessation of business if applicable

C1-Permanent closure: Tick Yes if you want to de-register due to permanent closure of your business and enter date of cessation. If you wish to temporarily close your business, please advise IRD of the dates of closure but you do not need to de-register your business

C2-Dissolution of the entity: Tick Yes if you want to de-register due to dissolution of entity

C3-Merger or consolidation: Tick Yes if you want to de-register due to merger or consolidation

C4-Death (Individual): Tick Yes if you want to de-register due to death of owner

C5-Others (specify) Tick Yes if you want to de-register due to other reasons

If you made any of these changes, include the date of the relevant change. Attach details if needed.

Section D: Certification

D1- Name of taxpayer or representative: Enter in this box name of taxpayer or representative

D2-Role: Enter in this box whether the person signing is the taxpayer or their representative

D3-Signature & stamp: Sign in this box your signature and stamp

D4-Date: Enter this box the date you signed

Section E: Space reserved for Inland Revenue Department (IRD)

E1-Copy of National Identity Card or Copy of Passport (If not permanent resident): Tick Yes if taxpayer submitted a copy of identity card or passport as evidence for change

E2-Copy of Trade License: Tick Yes if taxpayer submitted a copy of trade license

E3-Cancellation letter from the Ministry of Trade: Tick Yes if taxpayer submitted this letter

E4-Copy of Articles of Association or other documentation showing change of business entity type:

Tick Yes if taxpayer submitted a copy of articles of association or other documentation

E5-Tax Clearance Certificate: Tick Yes if taxpayer submitted a copy of tax clearance certificate

E6-Received by registration officer: Enter in this box name, signature & date of the tax officer who received the form

E7-Validated & Approved by head of registration unit: Enter in this box, name signature and date of the approving officer

_____ **End of Guidelines** _____