



SELF EMPLOYED CESSATION (SE5)

Section 1 - Personal Details

Full Name

Taxpayer reference number

Date of birth

Residential Address

Contact Phone Number(s)

Email Address

Section 2 - Business Details

Business name (if any)

Name(s) of business partner(s) (if applicable)

If the business is a partnership is it continuing to trade?

Yes ☐

No ☐

Section 3 - Cessation details

When did you cease trading as self-employed?

d	d	m	m	y	y
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Are you leaving Gibraltar?

Yes ☐

No ☐

If you are leaving Gibraltar, please specify your forwarding address:

Section 4 - Documentation Required

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Cessation accounts (if your business has ceased trading)

Section 5 - Declaration

I declare that to the best of my knowledge and belief the particulars given on this form are correct and complete.

Signed: _____

Date: _____