

| Тах | Year  |
|-----|-------|
| IWA | i cai |

## **Income from Occasional Presence in Gibraltar Declaration Form**

| Full Name     |  |
|---------------|--|
|               |  |
| Nationality   |  |
|               |  |
| D.O.B         |  |
|               |  |
| Tax Reference |  |
| Number        |  |
|               |  |
| Country of    |  |
| Residence     |  |
|               |  |
| Residential   |  |
| Address       |  |

| Have you been present in Gibraltar for this Tax year? | YES<br>(If so, please fill details<br>below) | NO |
|---|--|----|
|   |  |    |

| Date of Arrival | Date of Departure | Purpose of trip | No of days spent in<br>Gibraltar | Income earned in<br>Gibraltar whilst on<br>this trip £ |
|-----------------|-------------------|-----------------|----------------------------------|--|
|                 |                   |                 |                                  |  |
|                 |                   |                 |                                  |  |
|                 |                   |                 |                                  |  |
|                 |                   |                 |                                  |  |
|                 |                   |                 |                                  |  |
|                 |                   |                 |                                  |  |
|                 |                   |                 |                                  |  |
|                 |                   |                 |                                  |  |
|                 |                   |                 |                                  |  |
|                 |                   |                 |                                  |  |
|                 |                   |                 |                                  |  |
| Total           |                   |                 |                                  |  |

Additional Comments:

I DECLARE THAT TO THE BEST OF MY KNOWLEDGE AND BELIEF THE PARTICULARS GIVEN ON THIS FORM ARE CORRECT AND COMPLETE.

Signature

Date