

Issued by

Telephone number

Date of issue

Reference

Guide for new businesses

There is a general guide to CTSA (CTSA/BK4), and a guide for new businesses (Starting Up in Business pack) which includes general information on record keeping, and on where you can get advice on employing people. Both are available on our website at www.inlandrevenue.gov.uk or through the CTSA Orderline by telephoning 0845 300 6555 (fax 0845 300 6777). The CTSA Orderline is open 7 days a week between 8am and 10pm.

Information about the company

The company should complete and return this form as soon as possible so that I do not need to issue estimated tax bills.

Please give the information asked for below and over the page. Also let me have a copy of the company's Memorandum and Articles of Association to keep if the following apply

- the company has issued, or intends to issue, more than one class of share capital, or
- the company is involved in a joint venture/consortium.

The company name shown above may have been abbreviated due to the limitations of our computer. If the abbreviation is not acceptable please show below your preferred choice.

1. What is the address and telephone number of the Registered Office?

✓ appropriate box

Yes No

Address

Telephone number
(including national dialling code)

2. What is the address and telephone number where the business is carried out if different from the Registered Office?

Address

Telephone number
(including national dialling code)

3. What is the company registration number?

4. Has the company commenced trading?

- If Yes, when did the company commence trading (if different from the date of incorporation)

 / /

- If No, the expected date of commencement, if known

 / /

- To what date will the first accounts be prepared, if known (if you are unable to enter a date, or it changes, you must inform me within 12 months of the date trading starts)

 / /

5. If the company is a member of a group, please state

- the name of the group

- the Inland Revenue office which deals with the parent company of the group and, if known, that company's tax reference number of the parent company

6. What is the nature of the business to be carried on by the company?

7. The company is required to make returns of all annual payments, some interest paid, and the income tax deducted from them.

Is the company likely during the next 12 months to be paying

- interest (other than overdraft interest) on a debt thought likely to exist for more than a year, or
- royalties, or
- other similar annually recurring payments under a legal agreement to any of the following
 - an individual
 - a non-resident company *appropriate box*
 - a partnership which includes an individual Yes No
 - or a non-resident company?

8. The company is required to operate PAYE on all remuneration paid to employees, including fees paid or credited to directors.

- is PAYE already being operated? *appropriate box* Yes No
- if Yes, please give the name of the Inland Revenue office dealing with your PAYE and the reference number

9. The name, address and telephone number of the accountants or other agents who will be dealing with the company's tax affairs

Address
Postcode
Telephone number <i>(including national dialling code)</i>

10. If an existing business has been taken over

- please state the name and address of that business

Address
Postcode

- please state the name and address of the person from whom it was acquired

Address
Postcode

Information about the directors

To help me to allocate correct codes to the directors of the company, please give their full names, addresses, National Insurance numbers and, if known, their previous Inland Revenue office name and reference. *If there are more than three directors of the company, please give information about any other directors on a separate sheet.*

Full name
Address
Postcode

National Insurance number

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Inland Revenue office

Reference

Full name
Address
Postcode

National Insurance number

--	--	--	--	--	--

Inland Revenue office

Reference

Full name
Address
Postcode

National Insurance number

--	--	--	--	--	--

Inland Revenue office

Reference

Declaration

Tick this box if you are enclosing a copy of the Company's Memorandum and Articles of Association

The information I have given on this form is correct and complete to the best of my knowledge and belief

Signature

Date

State the capacity in which you have signed the form

Except where a liquidator has been appointed, any person who is authorised to do so may sign on behalf of the company. A photocopy of a signature is not acceptable.