

## Government of the Republic of Trinidad and Tobago

## Ministry of Finance Inland Revenue Division

## **Application for VAT Bonds**

## **Business Information** BIR Number: VAT Account Number: Letter ID Number: **Business Name:** Business Mailing Address: **Business Phone Number: Banking Information** This is required by the Central Bank of Trinidad and Tobago for the deposit of interest payments. Name of Bank: Account Number: Checking Account Type Saving **VAT Periods** Enter the ending month and year of the VAT period applied for. Separate multiple periods with a comma. I, the undersigned, hereby apply for VAT Bonds to be issued for the payment of refunds of VAT, \_, for the periods listed above. due and payable to I also accept that the value of the bonds will be rounded down to the nearest thousand dollar and any remaining balance being paid via a cheque. **Applicant Name:** Position or Title:

Date:

**Applicant Signature:**