1 Applicant



1.1 Family name										
			405			14454	61:41 (11			
1.2 Given names			1.3 Finnish personal identity co			ode 1.4 Date of birth (ddmmyyyy)				
1.5 Postal address				1.6 Postal code	1.7	Post office				
1.8 Country of residence	1.9 Country code	1.10 Tax id. no. i	n country	of residence (TIN)	1.11	Telephone	number			
4.40 American de calcular an arranda					1 14	Fnter the i	number from	vour previ	ious	
1.12 Are you a teacher or a researcher? 1.13 Have		1.13 Have you a	ou asked for a refund earlier?			1.14 Enter the number from your previous refund decision				
yes no yes			no							
1.15 Is this an income specified in	the Act on ke	ey employees (18	.12.1995	/1551)?						
yes no										
700 110										
2 Information on the agent s	igning this	application for	m. Enc	lose letter of auth	orisati	on.				
2.1 Representative's name										
2.2 e-mail				2.3 Telephone num	ber					
2.4 Address										
2.5 Letter of authorisation is	enclosed wit	h this form.								
3 Information on income 3.1 Type of income										
wages/ salaries trade inc	come 1)	other, please spe	cify:							
3.2 Name of payer										
3.3 Date of payment (dd.mm.yyyy)	3.4 Amount	of the income €	I C	3.5 Amount of tax withheld	€	3.6 A	Amount reque	sted € I	l C	
			+	withheld		c as it	<u> siuriu</u>		_	
3.7 On what grounds do you seek	refund?									

¹⁾ If you seek refund for an amount withheld on trade income, enclose Form 6205 (Explanation of business conducted in Finland by self-employed individual).





APPLICATION FOR REFUND OF FINNISH WITHHOLDING TAX ON OTHER INCOME THAN DIVIDENDS, INTEREST, AND ROYALTIES (Individual applicant)

4.1 IBAN account number (or other int'l format)		4.2 BIC or SWIFT code	3.3 Name of account holder
4.4 Name of bank		4.5 Address of bank	<u> </u>
.6 Postal code	4.7 Post office		4.8 Country
.or ostar code	4.7 T OST OFFICE		4.0 Country
O Classing and			
.9 Clearing code			
A certificate of ta	x residency issued by lo	cal authorities is enclosed	i.
The undersigned			
- declares that the	e income is not effectively c	onnected with the applicant's	permanent establishment in Finland.
_	-		n the Finnish payer of income concerning this income.
Date Signature			Name in printed letters
			<u> </u>
be completed by the suinvaltion veroviral	the tax authority in the	State of residence:	
CERTIFICATE OF	FISCAL RESIDENCE	≣	
We hereby confirm t	hat the applicant, within	the meaning of the Double	e Taxation Convention, was resident
in the country mention	oned above - as well as		sidence is Ireland or United Kingdom -
on the date when the	e income was paid.		
Date	Signature and sta	amp of the tax authorities	