


 Tax Administration
 P.O. Box 560
 FI-00052 VERO
 FINLAND

Filer is	
<input type="checkbox"/> natural person	<input type="checkbox"/> corporation

1 Filer

1.1 Family name or name of corporation		1.2 Given names	
1.3 Finnish personal identity code		1.4 Date of birth (dd.mm.yyyy)	1.5 Telephone number
1.6 Postal address		1.7 Postal code	1.8 Post office
1.9 Country of residence		1.10 Country code	1.11 Tax identification number in country of residence (TIN)
1.12 Is this an income specified in the Act on key employees (18.12.1995/1551)?			
<input type="checkbox"/> Yes <input type="checkbox"/> No			

2 Information on the representative signing this application form. Enclose letter of authorisation.

2.1 Representative's name		2.2 Telephone number	
2.3 Postal address (street or road)		2.4 House nr	2.5 Entrance
			2.6 Flat number
2.7 P.O. Box	2.8 Postal code	2.9 Post office	
<input type="checkbox"/> 2.10 Letter of authorisation is enclosed.			

3 Information on income

3.1 Type of income			
<input type="checkbox"/> wage/salary <input type="checkbox"/> dividend <input type="checkbox"/> employee stock option <input type="checkbox"/> other, please specify:			
3.2 Name of payer		3.3 Payor's Business ID	
3.4 Date of payment (dd.mm.yyyy)		3.5 Amount of the income € c	3.6 Amount of tax withheld € c
3.7 Tax at source to be imposed € c			
3.8 Additional information			

Date	Signature and printed name