LESOTHO REVENUE AUTHORITY
APPLICATION FOR TAX CLEARANCE CERTIFICATE

Application is hereby made for a Tax Clearance Certificate under the tax laws of Lesotho.

Note: This Application form must be completed in full or the Application will not be considered. No other style of applications other than this form will be considered.

Taxpayer Identification Number (TIN): | | | | | | | | | | - | |

Passport number (if individual/ trader) - Registration number for company:

1. Name of Applicant/ Legal Entity:

   Nationality (if individual):

   Date of birth (if individual)/ Date of commencement:

2. Trade Name:

   Nature of Business:

3. Postal Address:

   Postal code:
   Telephone:
   Cell Phone:

   Physical Address:

   District:

5. Name and address of Accountant or Auditor:

6. Name, address and account numbers of bank accounts maintained (or planned):

7. Type of entity (check one):

☐ (A) Sole Trader
☐ (B) Professional Body
☐ (C) Partnership
☐ (D) Limited Company
☐ (E) Public Company
☐ (F) Government Body
☐ (G) Charity
☐ (H) Other: _____

8. Names and residence addresses of partners or principal/ director(s) owner(s) and officer(s):

Name:	Title:	Date of Birth	Residence:	Telephone:
	Public Officer			

I declare that the information in this form is true and correct in every respect. I understand that false declaration can result in prosecution and imposition of penalties.

Name and Capacity – (type or print):

Signature | Date

▼ For LRA use only ▼

Date received	Remarks:	Is the form filled in correctly? Yes or No	Date certificate issued:
Trade Activity Class:	Name of officer:	Signature:	Date:
Entity Type:			