



CURRENT TAX OFFICE		
File Identification number	ID number	
Surname	Full Names	
Home address	Files to be transferred	
Postal Address		
Mobile number		
E-Mail address		

TRANSFER TO

NEW TAX OFFICE		
File Identification number	ID number	
Surname	Full Names	
Home address		
New Postal Address		
Mobile number		
E-Mail address		

Declaration: I hereby declare that the details furnished above are true and correct to the best of my knowledge and undertake to inform you of any changes therein, immediately. In case any of the above information is found to be false or untrue or misleading or misrepresenting, I am aware that I may be held liable for it. I further authorize that all my tax files indicated above be transferred to my new tax offices.

Authorised signature

Effective date of transfer

FOR OFFICE USE ONLY