

**VALUE  
ADDED TAX**  
Partnership Details



For official use only
Date of receipt

Each partner should complete one of the sections below.

Please start at the beginning of each line and leave a space between words.

Please use BLOCK CAPITALS and write clearly in ink.

Registration No. (where known)

**1**

Full name

Home address

Postcode

Home telephone  Mobile telephone

National Insurance Number or Tax Identifier in country of origin

Signature  Date

**Partner details**

**2**

Full name

Home address

Postcode

Home telephone  Mobile telephone

National Insurance Number or Tax Identifier in country of origin

Signature  Date

**Partner details**

**3**

Full name

Home address

Postcode

Home telephone  Mobile telephone

National Insurance Number or Tax Identifier in country of origin

Signature  Date

**Partner details**

**4**

Full name

Home address

Postcode

Home telephone  Mobile telephone

National Insurance Number or Tax Identifier in country of origin

Signature  Date

**Partner details**

**5**

Full name

Home address

Postcode

Home telephone  Mobile telephone

National Insurance Number or Tax Identifier in country of origin

Signature  Date

**Partner details**

**6**

Full name

Home address

Postcode

Home telephone  Mobile telephone

National Insurance Number or Tax Identifier in country of origin

Signature  Date

**Partner details**

**7**

Full name

Home address

Postcode

Home telephone  Mobile telephone

National Insurance Number or Tax Identifier in country of origin

Signature  Date

**Partner details**

**8**

Full name

Home address

Postcode

Home telephone  Mobile telephone

National Insurance Number or Tax Identifier in country of origin

Signature  Date

**Partner details**

**9**

Full name

Home address

Postcode

Home telephone  Mobile telephone

National Insurance Number or Tax Identifier in country of origin

Signature  Date