

# The Treasury YnTashtey

Assessor N Guffogg

For Official Use – NINO allocated/traced	Tax Reference Number		
		Date of Receipt:	/ /

### APPLICATION FOR A NATIONAL INSURANCE NUMBER

If you have a National Insurance Number, think you may have a National Insurance Number, or have previously applied to be registered for National Insurance purposes, please let us know before completing the form

You should only apply for a National Insurance Number if you:

- Are about to start work for an Isle of Man (IOM) employer, or have ever worked for an IOM employer
- Are about to start self-employment in the IOM, or have ever been self-employed in the IOM
- Have been awarded an IOM Social Security benefit
- Have been accepted by the Division to pay voluntary National Insurance Contributions

Have been accepted by the Division to pay voluntary National Insurance Contributions					
About you – this part must be completed in all cases					
1. Personal Details: the name entered here should be the name that you want to be known by in the Isle of (IOM) when dealing with the Division	Man				
Surname/family name Suffix Example: JP, OBE, etc.	<b>C</b> .				
Forename(s) – in full					
Title Mr Mrs Miss Other					
2. Any other names you are currently using or have used in the past. Reasons for use could include marrie maiden name, legal name, name adopted by a previous partner etc	d name,				
Fitle Surname/family name Suffix Forename(s) – in full Reason for use					
3. Date of Birth DD / MM / YY  4. Gender Male Female					
5. Reason for this application					
Employment Self-employment Claim to benefit Voluntary Contributions					

### 6. Contact details

All addresses here should correspondence to be sent		orresponder	nce address if your current h	ome address is unsafe for
Home Address				
	Pc	ostcode		
National Insurance Number		- this addr	ess will only be used for the	purpose of issuing a
	Po	ostcode		
Daytime contact number(s	s)			
7. If you have previous	ly had an address in the	∍ IOM or U	Jnited Kingdom (UK), plea	ase provide details
Previous address 1 Previous address 2		Previous address 2		
	Postcode			Postcode
Dates at this address	Tostcode		Dates at this address	Tostcode
From	То		From	То
DD / MM / YY	DD / MM / Y	Υ	DD / MM / YY	DD / MM / YY
8. Please provide detail	Is of your arrival to the	IOM		
Date arrived in IOM:	Date left the IOM:	Purpose of	f stay	Country arrived from
DD <b>/</b> MM <b>/</b> YY	DD/MM/ YY			
/ /	/ /			
/ /	/ /			
About your occupation	on - complete if you a	re about	to commence work	
9. Permission to work i	n the IOM			
Do you require a IOM Wor	rk Permit? YES	NO		
If applicable, please provide	de Work Permit number _			
Do you require a Visa to w	vork in the IOM? YES	NO		
If <b>yes</b> , we will need to see	e your original Visa			

## 10. Please provide details of your current and past employment in the IOM or UK Work end date Employer name Employer telephone Number Work start date DD/MM/ YY DD/MM/YY Your job title **Employer address** Employer email address Postcode Work start date Work end date Employer name Employer telephone Number DD/MM/ YY DD/MM/YY Your job title **Employer address** Employer email address Postcode About your self-employment - complete if you are about to commence self-employment 11. If you are about to become self-employed in the IOM please provide details Have you had your self-employed status approved by the Income Tax Division? Yes If no, you will need to complete form R133 Commencement of Self Employment About your Social Security benefit claims - this part must be completed if you are claiming a benefit 12. Please provide details Date of claim Date claim ended Name of benefit(s) claimed About help with your application - to be completed if you have had help completing this form 13. If someone has helped you to complete this form, please provide details of that person below Contact number Name Address Relationship to you

Postcode

Additional Information – please tell us any other information that may affect your application				
14.				
Declaration				
I declare that I do not currently have a National Insurance number and wish to apply to be registered for one and that the information given is correct and accurate.				
Date	Signature			
/ /				

Please note that personal details on this form maybe shared between the Income Tax and Social Security Divisions of the Treasury for the purposes of maintaining Income Tax, National Insurance and Social Security records. Information provided may also be shared with the IOM Passport and Immigration Office and the IOM Work Permits Office.

Privacy notice: To find out more about how we collect and use personal information, contact our office or visit our website at: <a href="www.gov.im/treasuryprivacynotice">www.gov.im/treasuryprivacynotice</a> We will send you a paper copy if you telephone us or write to us using the contact details provided on this form

#### What do I do next?

When you have completed this application form, please return the form in person to our office along with the following,

- 2 forms of identification, one of which must include a recent photograph such as your passport or driving licence
- If you are applying for a National Insurance number for employment purposes, then please provide evidence of your employment offer such as a contract of employment/letter from your employer

Please contact us if you require any help or have any questions regarding this form.

Telephone: (01624) 685400 or email: <a href="mailto:nationalinsurance.itd@gov.im">nationalinsurance.itd@gov.im</a>

National Insurance Contributions Income Tax Division Government Office Bucks Road Douglas Isle of Man IM1 3TX