

Machine Games Duty Overseas representative

When to use this form

You should fill in this form if your business address is not in the Isle of Man and you may need to appoint someone in the Island to act as your MGD "overseas representative".

Please write clearly and in black ink.

Please send the completed form to Isle of Man Customs & Excise, PO Box 6, Custom House, North Quay, Douglas, Isle of Man, IM99 1AG. If you need further help or have any other queries, please call the Advice Centre on 648140.

Part A – About the status of your overseas representative							
Name of the business registered for Machine Games Duty (MGD)							
MGD registration number							
Please tell us the legal status of your Overseas	Repre	esentative (tick one	e box)				
Sole Proprietor		Go to Part B					
Partnership		Go to Part C					
Corporate body registered in the Island		Go to Part D					
Unincorporated body		Go to Part E					
Part B – Sole Proprietor							
Full name of overseas representative							
Date of birth							
Does the sole proprietor have a National Insura	nce n	number?	Yes		No		
If Yes, give the National Insurance number							
Is the sole proprietor registered for VAT?		Yes			No		
If Yes, give the VAT registration number							
Now go to Part F							

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Part C – Partnerships			
Name of the partnership			
If the partnership does not have a name please give the full names of all the partners (continue on a separate sheet if necessary)			
Total number of partners within the partnership			
Is the partnership registered for VAT?	Yes	No	
If Yes, give the partnership VAT registration number			
Now go to Part F			
Part D – Corporate Body			
Companies Registry registration number			
Date of Incorporation			
Is the corporate body registered for VAT?	Yes	No	
If Yes, give the corporate body VAT registration number			
Now go to Part F			
Part E — Unincorporated body			
Is the unincorporated body registered for VAT?	Yes	No	
If Yes, give the unincorporated body VAT registration number			
Part F – Appointment information			
Please give the date you would like the appointment of your overseas representative to start			

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Part F – Overseas representative contact information

Address					
		Postcode:			
Contact information -		Telephone:			
		Mobile number:			
		Fax:			
		Email:			
	De	eclaration			
We, the persons named below, declare that to the best of our knowledge and belief the information given on this form and any accompanying documents is complete and correct.					
Business o	wner details				
Status or position					
	(e.g. proprietor, partner, director, trustee etc)				
Date					
Full name					
Signature					
Overseas r	epresentative details				
Status or					
position	tee etc)				
Date					
Full name					
Signature					

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Whilst that information will primarily be provided by you, where the law allows we may also get information about you from other organisations, or give information about you to them. This may be to check the accuracy of the information provided, prevent or detect crime or protect public funds in other ways. These organisations may include other government departments, the police and other agencies.

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