

Excise Warehousing Application to register as an excise warehousekeeper

You must apply for registration using this form if you would like to be authorised as an excise warehousekeeper.

You must apply at least 30 days before the date on which you wish your authorisation to begin.

You must ensure the form is completed accurately and includes all the information requested or registration may be refused.

For further information refer to Notice 196 *Excise Goods: Authorisation of warehousekeepers, approval of premises and registration of owners.* For a copy, go to www.hmrc.gov.uk and enter Notice 196 in the search box.

Please complete this form using black ink and capital letters and send it to Isle of Man Customs & Excise, PO Box 6, Custom House, North Quay, Douglas, Isle of Man, IM99 1AG.

Business details

If you are a group registration, the represe	ntative member must complete this form
Are you registered for VAT? (please tick)	☐ Yes ☐ No
If "yes" please give your VAT registration n	umber
 Sole proprietors: enter your full name - name(s) followed by surname. Partnerships: enter your trading name. if you do not have one, enter the full n of all the partners. Partnerships must also complete form EX 62B MAN and enclose it with this fo If the business is a limited company for example, enter the company's full name. Trading name (if different from above)	Or, ames rm.
If you are VAT registered, enter the address you have registered as your VAT principal place of business	Address Postcode Phone No Fax No Email

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What is the legal status of the business? (please tick)	Sole Proprietor Partnership Limited Company (inc. PLC) LLC Other
	Please specify
If the business is a corporate body registered in the IOM (for example, a limited company), enter the following details from the Certificate	Certificate No
of Incorporation	Date of Certificate
Warehouse details	
Give us details of all excise warehouses you own authorised excise warehousekeeper is being made	, that is, all warehouses for which your application as e. Continue on form EX 61A MAN if necessary.
Ware	house name
Post	code
Phor	ne
Fax	
Ema	il
Ware	ehouse Approval No
	ing name ifferent from above)
Wareh	nouse name
Posto	code
Phon	
Fax	
Emai	 I
Ware	ehouse Approval No
Tradi	ing name

(if different from above)

You can avoid a financial penalty by registering with us at the correct time. You have the right to appeal if we impose such a penalty.

Declaration I declare that the information given on this form and in any accompanying document is true and complete. Full name of person making the application Signature Date Capacity in which signed for example, sole proprietor director **Privacy Notice** The Treasury collects information about you in order to administer taxation and carry out other functions for which it is responsible (e.g. National Insurance, customs and excise duties, property rates, social security benefits, state pensions and legal aid etc.), and for the detection and prevention of crime. 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. To find out more about how we collect and use personal information, contact any of our offices or visit our website at: https://www.gov.im/about-the-government/departments/the-treasury/privacy-notice/ FOR OFFICIAL USE ONLY Date of receipt **Initials** Date keyed Refused **Approved**

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EDR (date)