



The Treasury *Yn Tashtey*

Assessor
Nicola Guffogg

Income Tax Division

Government Office, Douglas
Isle of Man, British Isles
IM1 3TX
Telephone (01624) 685400
Fax (01624) 685351
Email incometax@itd.treasury.gov.im
Website www.gov.im/incometax

Your Reference Number H_____

School Leaver/Student – Personal Details

If you have commenced employment or are in receipt of Manx source income and/or benefits, please complete all sections of the form overleaf including the declaration, and return it to this office.

You are not required to pay National Insurance Contributions until you are 16 years old. If you are over 15 years old and have commenced employment we will use the information on this form to issue your National Insurance Number. You will need to give your employer this number when you receive it.

Please be aware that failure to return this form may result in incorrect tax codes being operated by your employer.

For further guidance please visit our website www.gov.im/incometax

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

The Income Tax public counter opening times can be found by visiting our website www.gov.im/incometax.

1. Full Name (s) _____

2. Date of Birth ____/____/____

3. Contact Telephone Number _____

4. National Insurance Number (if applicable) _____

If you do not have a Manx or UK National Insurance Number one will be issued on receipt of this form.

5. Current Address (if different to above)

6. Please provide details of any current Isle of Man employment (name of employer and date started)

7. If you have not lived on the Island from birth, when did you move to the Island?

____/____/____

Declaration

Please note that personal details on this form will be shared between the Income Tax and Social Security Divisions of the Treasury, for the purposes of maintaining your Income Tax, National Insurance and Social Security Benefits.

I (full name) _____

Declare that to the best of my knowledge and belief the particulars given on this form are true and correct in every detail.

Signature: _____ Date: ____/____/____