

CONFIDENTIAL

This form should be completed by the employee and retained by the employer

EMPLOYEE'S PERSONAL DETAILS FORM

TAX REFERENCE NUMBER:

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NATIONAL INSURANCE NUMBER:

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SURNAME: _____ Mr / Mrs / Miss / Ms *

FORENAME(S): _____

ADDRESS: _____

DATE OF BIRTH: ____ / ____ / ____

MARITAL STATUS: SINGLE / MARRIED / SEPARATED / DIVORCED / WIDOWED *

FORENAMES OF SPOUSE: _____

PREVIOUS NAME: (If changed since 6th April last) _____

RESIDENTIAL STATUS FOR TAX PURPOSES: RESIDENT / NON-RESIDENT*

(If you have lived, or intend to live in the Isle of Man for longer than 6 months - you will be considered resident for tax purposes)

ARE YOU IN RECEIPT OF THE STATE RETIREMENT PENSION? YES / NO *

IF YOU DO NOT HAVE A FORM T21 TO HAND TO YOUR EMPLOYER
PLEASE COMPLETE OVERLEAF

I certify that the particulars shown are, to the best of my knowledge and belief, true and correct in every detail.

Signed (employee) _____ Date ____ / ____ / ____

* Delete as appropriate

IF YOU DO NOT HAVE A FORM T21 (EMPLOYEE'S LEAVING CERTIFICATE) - PLEASE INDICATE THE REASON BELOW

AS APPROPRIATE

 A

SECONDARY EMPLOYMENT

Tick the box if you have more than one employment and this new employment will **not** be your main occupation.

 B

STUDENT - RESIDENT OR NON-RESIDENT

 C

NEW RESIDENT

Tick this box if you have recently arrived on the island and intend to reside here for **longer than six months**.

 D

SEASONAL (NON-RESIDENT)

Tick this box if you are a non-resident of the Isle of Man but will be employed on the Island between 1st April - 31st October **in the Tourist Industry**.

 E

SCHOOL LEAVER

Tick this box if you have recently ceased full-time education.

 F

ALL OTHER CASES - PLEASE GIVE DETAILS

Tick this box if none of the above reasons apply to you, and say why.

QUERIES - IF YOU HAVE ANY QUERIES RELATING TO THE COMPLETION OF ANY PART OF THIS FORM, PLEASE ASK YOUR EMPLOYER FOR ADVICE OR CONTACT THE INCOME TAX DIVISION, GOVERNMENT OFFICE, BUCK'S ROAD DOUGLAS - TELEPHONE 685410.

FOR USE BY THE EMPLOYER

Current Tax Code, from Form T21

If no T21 refer to Emergency Codes in Part F of Employer's Guide