Questionnaire for value-added tax registration of entrepreneurs with registered offices abroad							
Tax numbe	er / reference number	Receipt stamp or date of receipt					
1. General company details							
1.1. Ac	1.1. Address <u>abroad</u> and contact details of the entrepreneur						
	Company name						
	Registered office (street, house number, postcode, town)	Country					
	Place the company management is based, if different (street, house number postcode, town)	er, Country					
	Postbox, postcode (street address), town	Country					
_	Email	Phone / fax					
	Please enter your email address only, if you agree to co (please refer to the separate form)	mmunication via email.					
	Please enclose a residence certificate issued by th	e foreign tax authority!					
Ado	dress in Germany (if applicable)						
	Registered office (street, house number, postcode, town)						
	Place the company management is based, if different (street, house number, postcode, town)						
	Postbox, postcode (street address), town						
	Email	Phone / fax					
		Thomas lax					
1.2. When did the company take up operations in the Federal Republic of Germany?							
1.3. Field of activities (see attachment to the questionnaire) Please give a detailed account of your company's activities in Germany.							

1.4. Operating facilities				
Please enclose contracts!				
☐ No ☐ Yes address (street, house number, postcode, town)				
1.				
2.				
If there are more than two operating facilities, please enclose a separate list.				
1.5. Form of company (Please enclose the corresponding contracts!)				
Established as of Relocated as of				
Taken over on Restructured as of				
1.6. Legal form of the company/association				
Company constituted under civil law Atypical silent partnership				
General partnership Working group in the construction industry				
Limited partnership GmbH & Co. KG (Limited commercial partnership				
where the limited partner is the managing company. Please enclose articles of association of the LLP.)				
Public limited company Private limited company				
For foreign companies, please indicate the applicable foreign designation! (S.A. Ltd. doo dooel etc.)				
1.7. Chamber affiliation (Chamber of Crafts / Chamber of Industry and Commerce)				
☐ yes ☐ no				
1.8. Entered in the commercial register of the home country				
yes, since (please enclose excerpt Registration is intended.				
from the commercial register incl. translation) An application has been submitted to the				
no commercial register.				
Is the company entered in the commercial register in the Federal Republic of Germany?				
no yes (Please enclose certificate of registration.)				
If so, has a corresponding branch office been established?				
yes no				
1.9. Which local facilities exist that serve your company (e. g. site huts, equipment sheds, office				
space, accommodation units, payroll office, workshop, etc.)? (Please enclose a list including location details and dates since when the facilities exist!)				
1.9.1. Do you operate any permanent local facilities or installations in the Federal Republic of				
Germany, other than those listed under 1.7. (branch office, warehouse, administrative office, office premises, production site, other)?				
NO Ves (Please enclose a separate list including location details and dates since when the facilities exist!)				
1.9.2. Do you rent the facilities or installation listed under 1.7. and 1.7.1. from companies				
based in the Federal Republic of Germany, or have you been granted rights of joint use that are not of a temporary nature?				
not of a temporary fractare: no				
1.9.3. For which purposes do you operate the facilities or installations indicated under 1.7. and				
1.9.1.? (Please indicate in the respective separate list!)				

1.10. Does the company that is to be registered undertake active business operations outside of the Federal Republic of Germany?								
n	no yes (Please indicate exact activities and scope thereof!)							
		the company						
1.12. Loca	1.12. Location of company management (Indicate only, if different from the company address!)							
1 12 lo the	o company	already reg	istored	for toy nu	ırnasası)		
		aneady reg Yes (Please er		•	•	•		
		y Co (Flease el	iter the io	_	office		Tax number	
		Wage tax						
		Corporation ta	ıх					
		∫ Mcome tax	ax					
							petent municipality, pursi	uant to
		rade Regula	ations (0	3ewerbed	ordnung))?		
	no	yes	matana	as Hava	oommor	roiol/oo	of ampleyed (freelense)	activities.
		ne past five		:5. Паче	comme	Ciai/Se	elf-employed (freelance)	activities
n	no yes (Please describe the nature and duration of the activities!)							
1.16. Banl	k details fo	r tax reimbu	ırsemer	nts and di	rect deb	it trans	sfer	
Bank details for reimbursements Please ensure that the details indicated here are identical with those registered with your banking institution (full account number, identical spelling of your name).								
IBA	IBAN				BIC (SWIFT code)			
Ва	Banking institute				Account holder			
Ple	ease ensure fo	or all payments	that all re	equired deta	ils are ento	ered und	der intended use. The following	details
mu	must be indicated for all payments: Tax number, type of tax, period, surname or company name							
l VV	ould you li	ke to partici _l	pate in i	the direct	debit sc	cheme ⁻	?	
	Yes, I have enclosed the completed SEPA direct debit mandate.							
If the account holder and the company that is being registered are <u>not</u> identical, please supply an account authorisation certificate issued by the account holder!								
1.17. Tax counselling in the Federal Republic of Germany								
	no		y	es				
Na	Name Add			Address	dress			
Ph	Phone		Fax	I	Email			

	No authorised receiving agents			Authorised receiving agents (please enclose authorisation document)			
	Is the tax advisor also a (Abgabenordnung, AO)		rised rece	eiving agent pu	rsuant to § 123 of the Tax Code		
	Yes No. Please indicate an authorised receiving agent under 1.18.						
1.18. Authorised receiving agent (Can only be considered, if a separate authorisation document is enclosed.)							
	no	_ у	es				
	Name			Address			
	Phone		Fax		Email		
	If you do not indicate an authorised receiving agent in Germany, correspondence company may be considered received one month after postal dispatch (§ 123 AO) organisations that are based in the countries listed in the Tax Code Application D Abgabenordnung, AEAO) regarding § 122 AO, paragraph 3.1.4.1, decisions made assessments, decisions regarding objections, etc.) will be publicly delivered purs Service in Administrative Procedures (Verwaltungszustellungsgesetz, VwZG).			(§ 123 AO). In the case of taxable plication Decree (Anwendungserlass zur ions made by the tax office (tax ivered pursuant to § 10 of the Law on VwZG).			
	las a permanent represent to § 13 AO?	ntative i	n the Fed	eral Republic	of Germany been appointed		
	no	_ у	es				
	Name			Address			
	Phone Fax			Email			
applica	1.20. Application for reimbursement of input tax: Has the company ever submitted an application for reimbursement of input tax to the Federal Central Tax Office (Bundeszentralamt für Steuern)?						
1 21 In	no yes (for the f						
1.21.11	formation regarding prof		IIIIalion				
	Cash income statement Asset evaluation (balance sheet); opening balance sheet is enclosed. will be provided later.						
	Does the financial year differ from the calendar year? yes no						
1.22. F	1.22. For companies: Representation of the company						
	Managing director						
	Associate(s)/partner(s)					
	Name, address, phone, fax, email						
	Name, address, phone, fax, email						

	1.23. For companies: Details of the associates/partners						
	(If there are more than two associates/partners, please enclose a separate list with consecutive numbering of the details listed below for this section!)						
		Name, company				,	
		Address					
		Date of birth/date of incorporation					
		Profession/activity/type of company	,				
		Nature of involvement					
		Share of results in %					
		Tax office/tax number					
2	2. Valu	e-added tax					
2	2.1. Ex	pected turnover in the Federal Re	public	of	Germany		
		in the year operations are taken up			in the following year		
			EU	R		EUR	
2	2.2. Ta	xation of payments on accruals/ca	ash bas	sis	,		
		I calculate value-added tax based of	n				
		agreed upon payments			ved payments.	n an acab basis	
		(accruals basis).	ın	er	eby apply for taxatio	n on cash basis.	
2	2.3. Pe	rmanent extension					
	I would like to take advantage of the permanent extension of the deadline for submitting value-added tax returns. I am aware that where value-added tax returns are submitted monthly, a special advance amount shall be calculated and paid. I am aware that the tax office may revoke a permanent extension pursuant to § 18 of the Value-Added Tax Act (UStG) in conjunction with section 18.4 of the Value-Added Tax Application Decree (UStAE). The application for permanent extension must be transmitted electronically.						
2	2.4. Value-added tax identification number (VAT ID number)						
		I need a VAT ID number to	partici	ра	te in intra-Commu	nity trade.	
	Additional information for entrepreneurs, - who only generate tax-exempt turnover, and are thus excluded from input tax						
	deduction, - for whose turnover no value-added tax is applied pursuant to § 19 section 1 of the value-added tax Act (UStG),						
		- who pay tax on their turnover, based on the average rates provided in § 24 UStG:					
		I am applying for a VAT ID number, because intra-Community deliveries are performed;					
		taxation applies for intra-Community purchases, as it is expected that the annual purchasing threshold of EUR 12,500					
		will be exceeded (§ 1a section 3 UStG); will not be exceeded but the purchasing threshold arrangement is waived for a duration of at least two years (§ 1a section 4 UStG).					
		new vehicles or particular excise-duty goods will be purchased inside the Community (§ 1a section 5 UStG)					
		☐ I need a VAT ID number for trading goods on the Internet via one or more electronic interface(s) as defined by § 25e section 5 UStG.					

2.5. Do you maintain business relationships with companies from the Federal Republic of Germany? No Yes (Please indicate the names and addresses of these companies. In addition to this, please enclose the written orders placed with your company.) 2.6. Since when has your company been carrying out activities subject to value-added tax in				
Germany? NO Yes (Please indicate the names and addresses of these companies. In addition to this, please enclose the written orders placed with your company.)				
In addition to this, please enclose the written orders placed with your company.)				
2.6. Since when has your company been carrying out activities subject to value-added tay in				
2.6. Since when has your company been carrying out activities subject to value-added tay in				
Germany?				
(Please provide this information, even if all turnover is exempt from value-added tax or limited to payments to employees.)				
2.7. Are the customers/service recipients of your company other companies, or non-entrepreneurs, or small-scale entrepreneurs pursuant to § 19 UStG?				
entrepreneurs small-scale entrepreneurs pursuant to § 19 UStG private individuals				
Is value-added tax indicated separately on the invoices issued to your customers?				
yes no				
2.8. What will be the total payable value-added tax amount per calendar year?				
2.9. How much taxable and tax-exempt turnover do you expect?				
2.10. Do you import or intend to import items from abroad (beyond Community territory in the sense of the UStG)?				
no yes (expected total value of imported goods:)				
3. Employees				
3.1. Date from when staff members will be employed, including managing directors:				
3.1. Date from when staff members will be employed, including managing directors:				
3.2. Expected number of employees:				
3.2. Expected number of employees:				
3.2. Expected number of employees:				
3.2. Expected number of employees: 3.2.1. Where are the employees from? (please indicate countries) 3.3. Where does payroll accounting take place?				
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3.2. Expected number of employees: 3.2.1. Where are the employees from? (please indicate countries) 3.3. Where does payroll accounting take place?				
3.2. Expected number of employees: 3.2.1. Where are the employees from? (please indicate countries) 3.3. Where does payroll accounting take place? 3.4. Which payments are made in addition to regular earnings (wage, salary) (e. g. holiday pay, Christmas bonus, royalties, surcharges for Sunday, holiday or				
3.2. Expected number of employees: 3.2.1. Where are the employees from? (please indicate countries) 3.3. Where does payroll accounting take place? 3.4. Which payments are made in addition to regular earnings (wage, salary) (e. g. holiday pay, Christmas bonus, royalties, surcharges for Sunday, holiday or night work) 3.5. Which non-cash remunerations are granted?				
3.2. Expected number of employees: 3.2.1. Where are the employees from? (please indicate countries) 3.3. Where does payroll accounting take place? 3.4. Which payments are made in addition to regular earnings (wage, salary) (e. g. holiday pay, Christmas bonus, royalties, surcharges for Sunday, holiday or night work)				

3.6.	8.6. Which costs are refunded to the employees? (travel costs, entertainment expenses, commuting costs, etc.)						
	(travel costs, entertainment expenses, commuting costs, etc.)						
3.7. How are tax deduction amounts calculated?							
	manually based on a table	automatically using payroll software					
4. Documents to be enclosed							
	The following documents must be enclos the questionnaire:	ed in addition to the certificates requested in					
	Rental agreements for office and storage space, buildings, etc.	 Attachment to the questionnaire for value-added tax registration of 					
	Original paper sheet bearing the company's letterhead	entrepreneurs					
	Receiving authorisation certificate						
	Authorisation for representation in tax-related matters						
I hereby confirm that the information I have provided above is true to the best of my knowledge and belief.							
F	Place, date	signature of the taxable person, or the representative, or authorised individual and stamp if applicable					