



Non-resident contractors' tax (NRCT) exemption application form

Income Tax Act 2007

- Include a copy of any written contract or agreement entered into, between the non-resident contractor and the contract payer.
- Please provide any additional information as an attachment to this application.
- If this is a renewal application, include the names and exact arrival and departure dates of persons present in New Zealand during the previous application.

Contractor

Name of non-resident contractor

Title (if individual)

Mr Mrs Miss Ms Other

Date of birth/Date of Incorporation

Day Month Year

IRD number (if any)

Passport number

Nationality

Country of tax residence

Contractor's overseas address

Street address

Suburb, city, country

Contract payer

Name of contract payer

IRD number (if known/any)

Country of tax residence

Address

Street address

Suburb, city, country

Contact telephone number

()

Daytime

()

Evening

Contact person and email address

Contract activity

Give a detailed description of New Zealand contract activity (include start and finish dates)

Persons present in New Zealand (actual and expected dates)

Arrival date

Day Month Year

Departure date

Day Month Year

Contract payment details	Amount	Due date	NRCT deducted Yes <input type="checkbox"/> No <input type="checkbox"/>
	<input type="text"/>	<input type="text"/>	<input type="text"/>
	<input type="text"/>	<input type="text"/>	<input type="text"/>
		Day Month Year	

Give a brief background of previous contract activity in New Zealand in the past two years

Do you expect to have a presence in New Zealand in the future? (if yes, give details)

Sub-contractor

If you have any sub-contractors, please give their details here. If not, go straight to the declaration below.

Name of sub-contractor

IRD number (if known)

Country of tax residence

Contractor's address

Street address

Suburb, city, country

Contact person

Contact telephone number () ()

Daytime Evening

Email address

Sub-contractors present in New Zealand (actual and expected dates)	Arrival date	Departure date
	<input type="text"/>	<input type="text"/>
	<input type="text"/>	<input type="text"/>
	Day Month Year	Day Month Year

Declaration

I declare that to the best of my knowledge, this information is true and correct.

I agree to communicating with Inland Revenue via email and accept that Inland Revenue will communicate via email where appropriate; understanding that at times these emails may contain confidential and/or commercially sensitive information.

I understand Inland Revenue will take all reasonable steps to mitigate any risk of emails being sent to the wrong recipient, but cannot guarantee that emails will not be intercepted while in transit.

I/organisation acknowledge that, once the email has been received, it is my/our responsibility to keep this information secure, and ensure it is not accessed by an unauthorised individual.

This application was completed by

Signed

Contact person Date

Contact telephone number () ()

Daytime Evening

Email address

Post or email application to:

Email: nr.contractors@ird.govt.nz

Phone: +64 4 832 5244

Inland Revenue, PO Box 2198 Wellington, New Zealand