 _税务局
Tax Bureau

## 外国居民享受避免双重征税协定待遇申请表 Application for Treatment Under Double Taxation Agreement

姓名 Full Name			
		国籍	
住所或居所		Nationa	lity
Domicile or Residence		邮政编	
名称		Postcod	e
DI CTT 1 C cm			
实际管理机构所在抽	·		
Place of Effective Mana	gement		
注册所在地	Бошен		
			· 1
		Postcode	;
Details of Income:			
支付人名称			
Payer's name			
地址 Address			hit 40 -
支付金额			邮编 Postcode
Amount of payment			支付日期
	·		Date of
			payment
地址 Address			邮 编 post
+114	·		哪 編 post   code
	支付日期	合同有效期	支付日期
Amount of payment	Date of	Period of	Date of
+4144	Contract	contract	payment
			paymont
地址 Address			邮编
古什么麵			post code
		合同有效期	支付日期
ranount of payment		Period of	Date of
		contract	payment
职业 Occupation	payment		
			邮编 Postcode
l l		1 -	支付日期
out or payment		Item of	Date of
		ıncome	payment
	注册所在地 Place of Registration  Details of Income:  支付人名称 Payer's name  地址 Address  支付金额	总机构所在地 Place of Head Office 实际管理机构所在地 Place of Effective Management 注册所在地 Place of Registration  Details of Income:  支付人名称 Payer's name 地址 Address  支付金额 Amount of payment  支付人名称 Payer's name 地址 Address  支付金额 Amount of payment  支付人名称 Payer's name 地址 Address  支付人名称 Payer's name 地址 Address  支付人名称 Payer's name 地址 Address  支付金额 Amount of payment  Date of Contract  下文付人名称 Payer's name 地址 Address  支付金额 Amount of payment  Date of payment  R业 Occupation 支付人名称 Payer's name 地址 Address  支付金额	总机构所在地 Place of Head Office 实际管理机构所在地 Place of Effective Management 注册所在地 Place of Registration  Details of Income:  支付人名称 Payer's name 地址 Address  支付金额 Amount of payment 地址 Address  支付金额 Amount of payment 地址 Address  支付金额 Amount of payment 地址 Address  支付人名称 Payer's name 地址 Address  支付人名称 Payer's name 地址 Address  大付人名称 Payer's name 地址 Address  大付人名称 Payer's name 地址 Address  大付金额 Amount of payment  レカー  レカー  レカー  レカー  レカー  レカー  レカー  レカ

五、申请人居民身份证明(由申请人为其居民的缔约国主管税务机关填写);或另附对方主管税务机关出具的专用证明。

Certificate of Resident Status of Claimant (For the use of responsible tax office of the Contracting State in which the Claimant is a resident) or attach the special certificate of resident issued by responsible tax office of the Contracting State in which the Claimant is a resident.

	Certification	
We certify thataccording to the provision of paragraph Taxation Agreement between	(claimant's name) is a resident of, of Article and the People's Republic of China.	in the Double
Claimant's serial numb	per: Date:	
	Signature or Stamp of Tax Office:	

以下由中国主管税务机关填写(The following for the use of responsible tax office of China only)

编号 (No.): 第

号

收到申请表日期	
	审核日期
Date of receipt of application	Date of examination
审核意见 Examination Report	
主办人(签字)	负责人(签字)
Responsible officer (signature)	
	Cinci officer (signature)

中华人民共和国国家税务总局 State Administration of Taxation The People's Republic of China

主管税务机关盖章 Stamp of tax office