

# Tax Refund Application for Businesses

## Business Information

**Business Name:**

**Tax Identification Number (TIN):**

**Business Address:**

**Contact Person:**

**Contact Number / Email:**

## Tax Period for Refund

**From:**

**To:**

## Refund Details

Description	Tax Type	Amount Paid	Amount to be Refunded

**Total Amount to be Refunded:**

## Reason for Refund Application

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## Supporting Documents Attached

- Copy of Original Tax Payment Receipts
- Tax Return Forms
- Bank Statements (if applicable)
- Other Relevant Documents

## Declaration

I hereby declare that the information provided in this application is true and correct to the best of my knowledge.

**Authorized Representative's Name:**

**Signature:**

**Date:**

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### **Important Notes:**

- Ensure all required documents are attached for smoother processing.
- Incomplete applications may result in delays or rejection.
- Applications must be submitted within the stipulated period as prescribed by tax authorities.
- Retain a copy of this application and all supporting documents for your records.