

Eswatini Revenue Service

DOMESTIC TAXES DEPARTMENT

Portion 419 of Farm 50, Along MR103, Ezulwini



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E-TAX APPLICATION FORM

Please complete this form and email to info@ers.org.sz

New application	tion Details update			
TAXPAYER DETAILS Name of entity: Taxpayer Identification Number (TIN):				
APPOINTED USERS				
NAME OF USER (S)	PIN	EMAIL ADDRESS	POSITION	TAX TYPE
				PAYE VAT INCOME TAX PROVISIONAL TAX
				PAYE VAT INCOME TAX PROVISIONAL TAX
				PAYE VAT INCOME TAX PROVISIONAL TAX
				PAYE VAT INCOME TAX PROVISIONAL TAX
By submitting this form, I hereby agree to abide by all rules, order, policies and procedures governing the use of the electronic filing system. I understand that the combination of login name and password will serve as the signature of the administrator filling the documents. Therefore as the public officer, I will ensure that each nominated user protects the security of their password and immediately notify the Eswatini Revenue Service (ERS) if I suspect that any of the passwords has been compromised. I will also promptly notify the ERS if there is a change in my personal data or that of the nominated users, such as name, e-mail address, entity address, telephone number, etc., and I will update the appropriate data within the ERS.				
Full Name				
		te		
Attachment in correspondence Check completeness of application form and supporting documents TIN / Public Officer Confirmation from RMS ID copy of appointed user ID copy and Letter of authorization from public officer				
Processed by:		Signature	D	ate