

INSTRUCTIONS

IT'S EASY TO GET YOUR NZ TAX REFUND. JUST FOLLOW EITHER APPLICATION OPTION 1 OR 2!

1

Complete, sign and date all the attached forms, return them by post (scanned or faxed copies of these forms cannot complete the application), along with a copy of your photo ID* and copies of your final payment documents (payslips, Summary of Earnings, etc.) to: **Taxback.com, IDA Business & Technology Park, Ring Road, Kilkenny, Ireland.**

2

To get things moving even faster, scan and email the above documents to: **newzealand@taxback.com**, prior to posting them. This way we can start processing your application way before your post is received.

* Acceptable ID is a legal and valid document, showing your photo and signature. (Such as a driving licence, passport, ID card, student card, 18+ card, etc.) If you send us a copy of your passport please send us a copy of your NZ visa or work permit as well.

*Thank you for choosing to use **taxback.com**. We look forward to working with you to apply for your New Zealand tax refund. In this pack, you will find everything you need to authorise taxback.com to apply for this refund on your behalf. Please read this pack carefully, sign and return to your nearest taxback.com office.*

*In order to apply for your **2013** tax refund we kindly ask you to follow these instructions:*

1. New Zealand Tax Refund Application Form

Please fill in the enclosed form with as much detail as possible.

2. Authorisation Form (IR597)

Please complete the form and sign where marked with an ✓.

3. New Zealand Tax Return Form (IR3)

Please complete the form and sign where marked with an ✓.

4. Early Assessment Form (IR50)

Please complete the form and sign where marked with an ✓.

5. Customer Agreement

Please fill in the form with your name and surname, sign and date it at the places marked with an ✓.

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NEW ZEALAND

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APPLICATION FORM

CONTACT INFORMATION

First Name	Family Name	
Mr <input type="checkbox"/> Mrs <input type="checkbox"/> Miss <input type="checkbox"/> Date of Birth ____ / ____ / ____	Email	
Phone	How did you hear about our company?	
Home address and country		
Have you worked in any other country? UK <input type="checkbox"/> Ireland <input type="checkbox"/> Other <input type="checkbox"/>	Have you applied for a tax refund from there? Yes <input type="checkbox"/> No <input type="checkbox"/>	
Which tax years would you like to apply for:		
1 st April 2012 – 31 st March 2013 <input type="checkbox"/>	1 st April 2011 – 31 st March 2012 <input type="checkbox"/>	1 st April 2010 – 31 st March 2011 <input type="checkbox"/>
1 st April 2009 – 31 st March 2010 <input type="checkbox"/>	1 st April 2008 – 31 st March 2009 <input type="checkbox"/>	1 st April 2007 – 31 st March 2008 <input type="checkbox"/>
Have you applied for a refund before? Yes <input type="checkbox"/> No <input type="checkbox"/> If Yes, please specify for which tax years:		
If you want us to check for you a previous tax year not listed above please specify the tax year:		

STATUS INFORMATION

Date of arrival in New Zealand ____ / ____ / ____	Date of departure from New Zealand ____ / ____ / ____
Address while in New Zealand	
IRD Number _____	New Zealand Visa Type
Purpose for visiting New Zealand	
Did you receive any other income apart from salaries and wages in NZ? Yes <input type="checkbox"/> No <input type="checkbox"/> If yes, what type of income?	
Do you intend to return to New Zealand? Yes <input type="checkbox"/> No <input type="checkbox"/> If yes, approx. when MONTH ____ / YEAR ____	

WHERE DID YOU WORK? EMPLOYER 1

Company name	City	Postcode
Address		
Telephone & Fax	Occupation	
Worked From ____ / ____ / ____ Until ____ / ____ / ____	Do you have your cumulative pay slip? Yes <input type="checkbox"/> No <input type="checkbox"/>	
If no, would you like us to source replacements for you?* Yes <input type="checkbox"/> No <input type="checkbox"/>	Have you received a Statement / Summary of Earnings? Yes <input type="checkbox"/> No <input type="checkbox"/>	

WHERE DID YOU WORK? EMPLOYER 2

Company name	City	Postcode
Address		
Telephone & Fax	Occupation	
Worked From ____ / ____ / ____ Until ____ / ____ / ____	Do you have your cumulative pay slip? Yes <input type="checkbox"/> No <input type="checkbox"/>	
If no, would you like us to source replacements for you?* Yes <input type="checkbox"/> No <input type="checkbox"/>	Have you received a Statement / Summary of Earnings? Yes <input type="checkbox"/> No <input type="checkbox"/>	

*Document retrieval fee applies

If you had more than 2 employers, please include information on a separate page.

- **Complete this form to nominate someone (for example, a family member or company's staff member) to act on your behalf with Inland Revenue. This includes making enquiries, receiving your statements, refunds and other correspondence. Having a nominated person does not change your responsibilities. You are still responsible for your own tax affairs, so you need to make sure that any returns are filed and tax paid by the due date.**
- **Use the space available on the back of this form if you need to nominate more than one person.**
- **For individuals**, a nominated person can only be chosen by the person whose account the nominated person will have authority.
- **For a non-individual**, a nominated person (for example, payroll clerk or office administrator) can only be set up by a company director, a trustee or estate administrator, or an executive officer.
- To protect your privacy and security we can only discuss your tax affairs and/or child support with you or the person you nominate to act on your behalf (your nominee).
- **Child support customers** will need to complete an *Elect someone to make child support enquiries on your behalf (IR146)* form. To order a copy, phone Child Support on 0800 221 221

Your first name(s) Your surname

Your IRD number Your phone number ()

(8 digit numbers start in the second box. 1 2 3 4 5 6 7 8)

Your postal address (We need this information to validate the nomination)

Non-individuals only

Organisation's name

Organisation's IRD number Nominator's position (eg director)

Please provide details of the person who will act on your behalf

Your nominee's first name(s) Your nominee's surname

Your nominee's IRD number Your nominee's phone number +353 1 887 1999

Your nominee's postal address


EUROPEAN STUDENT SERVICES LTD
IDA Business & Technology Park, Ring Road, Kilkenny, Ireland

Position occupied – non-individuals (eg office administrator)

TAX PREPARER

Show which accounts your nominee will act on your behalf for and how long they will act for

		Start date			End date		
		Day	Month	Year	Day	Month	Year
<input type="checkbox"/> Working for Families Tax Credits*							
<input type="checkbox"/> Fringe benefit tax							
<input type="checkbox"/> Goods and services tax							
<input checked="" type="checkbox"/> Income tax							
<input type="checkbox"/> PAYE							
<input checked="" type="checkbox"/> Rebate claims							
<input type="checkbox"/> Student loan							
<input type="checkbox"/> KiwiSaver							
<input type="checkbox"/> Other <input type="text"/>							
	(please specify)						

Your signature  / / Date

*Previously known as family assistance

12. Will you keep property in New Zealand (such as land, buildings or shares)? If "Yes" give details below.

Yes No (Tick one)

The address of any property

Street address or PO Box number

Town or city

Details of shares (attach a separate note if necessary)

What arrangements have you made for the shares and property?

13. Will you be keeping any New Zealand bank accounts open? If "Yes" attach details.

Yes No (Tick one)

14. Will you have any other income from New Zealand paid or credited to you after you leave? If "Yes" attach details.

Yes No (Tick one)

15. **Declaration**

*I will be away from New Zealand permanently or for more than 325 days and I will **not** have an enduring relationship with New Zealand after I leave. I understand that if I return to New Zealand my tax situation may be reviewed.*

Signature

/ /

Date

Privacy Act 1993

Meeting your tax obligations involves giving accurate information to Inland Revenue. We ask you for information so we can assess your liabilities and entitlements under the Acts we administer.

You must, by law, give us this information. Penalties may apply if you do not.

We may exchange information about you with the Ministry of Social Development, Ministry of Justice, Department of Labour, Ministry of Education, New Zealand Customs Service, Accident Compensation Corporation or their contracted agencies. Information may be provided to overseas countries with which New Zealand has an information supply agreement. Inland Revenue also has an agreement to supply information to Statistics New Zealand for statistical purposes only.

You may ask to see the personal information we hold about you by calling us on 0800 377 774. Unless we have a lawful reason for withholding the information, we will show it to you and correct any errors.

Notes

A New Zealand tax resident is anyone who:

- is in New Zealand for more than 183 days in any 12 months, or
- has an "enduring relationship" with New Zealand.

A person becomes a non-resident if they:

- are away from New Zealand for more than 325 days in any 12 months, and
- don't have an "enduring relationship" with New Zealand.

An "enduring relationship" with New Zealand covers presence in New Zealand, accommodation, social and economic ties, employment or business, personal property, intentions, benefits and pensions. Our booklet *New Zealand tax residence (IR 292)* has more information.

OFFICE USE ONLY

- IRD number provided.
- Return completed and signed.
- Confirmation of earnings, PAYE and earners' account levy and residual claims levy attached.
- Refund application – people leaving New Zealand (IR 50) completed and signed.
- Student loan assessment calculation (SL 50) completed if needed.
- Person will be absent for more than 325 days.
- Departure date confirmed (tickets, or a travel agent's itinerary and proof of full payment, attached).
- Flight number:
Day Month Year
- FIRST checked – prior year ind/arrears/previous return filed/SL and CS details updated.
Checked by:
Day Month Year

CUSTOMER AGREEMENT

The terms and conditions below refer to the taxback.com tax returns and refund services. Please read these points in full and ensure you understand them before signing.

I confirm that:

1. I understand that taxback.com is a trading name for the services of Taxback Inc., Chicago, USA, and hereby contract with Taxback Inc. to carry out the services described herewith.
2. I understand that Taxback Inc will utilise its parent company Taxback and its subsidiary and affiliate companies to gather information regarding the services where necessary and that the contract remains with Taxback Inc for the duration of the service.
3. I have signed the necessary power of attorneys to authorise Taxback. Inc, and / or its subsidiary undertakings trading as taxback.com and referred to hereafter as the Agent, to prepare this tax return and represent me before the Inland Revenue Department (IRD).
4. I have not filed and will not file an income tax return or apply for an income tax refund for the New Zealand tax year(s) I have authorised taxback.com to apply for and will not authorise any other party to do so on my behalf.
5. I authorise the Agent to receive all correspondence from the IRD on my behalf.
6. I want to avail of the offer to “pay no fee up-front” when I sign up for the service. In order to avail of this option, I understand that the fee will need to be paid by me when the refund has been issued by the New Zealand tax authorities.
7. I authorise the Agent to receive my refund cheque(s) from the tax authorities.
8. I further authorise the Agent to endorse the cheques, deduct the necessary fee and to send me the remaining amount.
9. I understand that once my refund is processed, I will be contacted by the Agent with regard to payment options for receiving my refund and will be able to provide my bank details.
10. Should I receive the refund directly from any other source other than the Agent, I understand and agree that I will pay the fee due to the Agent for the work completed.
11. I understand that the New Zealand tax authorities will make the final decision on the value of any refund due. I understand that the Agent will provide the best estimation possible based on current tax law and information given, however this is an estimation only, not a guarantee.
12. I agree to and accept the terms and conditions of service as written online at www.taxback.com and to any changes in the terms and conditions which taxback.com may affect from time to time, and to the fees of the Agent which represents the services I have requested and which are provided by taxback.com and/or its affiliate companies.
13. I understand that information collected in writing and/or verbally for New Zealand tax return filing services can and may be used for internal auditing purposes by taxback.com and provided to the Inland Revenue Department (IRD) for external auditing purposes.
14. I confirm that I have given the Agent all the information needed and available to me.
15. I commit to updating the Agent of any change in my contact details.
16. I understand that taxback.com will submit my application to the relevant tax office as soon as I have been informed of the refund amount and have sent all necessary documentation. Should I wish to cancel my application, I will contact taxback.com immediately. I understand that while taxback.com will make every effort to recall my application, this may not be possible.

Signature ✓	Date ✓
Name in print ✓	Date of birth ✓