

Finnish Tax Administration PO Box 560 FI-00052 VERO FINLAND



APPLICATION FOR REFUND OF FINNISH WITHHOLDING TAX ON DIVIDENDS, INTEREST, AND ROYALTIES (Individual applicant)

In the case of dividends, refunds cannot be requested until after the year of payment.

*mandatory information

1 Applicant								
1.1 Family name *				1.2 Given names *				
107 11 11 11 11					1450 4			
1.3 Tax id. no. in country of resid	ence *	1.4 Finnish personal i	identity	code or date of birth *	1.5 Country	y of residence *		
1.6 Postal address *				1.7 Postal code *	1.8 Post of	fice *		
1.9 Have you asked for a refund	earlier?	1.10 Enter the reg. no	. from y	our previous refund decision	1.11 Teleph	none number		
L _								
Yes No								
2 Information on the income								
2 This application concerns the t	ax withh	eld at source on: *						
dividends interest payments		oyalties						
		•						
3 Dividends (If more than one	paymen	ts of dividends wer	re ma	de, complete Form 6	5167e.)			
3.1 Receipt of dividends is *								
due to nominee-registered share	<u></u>	due on the applicant' shareholding	's dire	ct through a fu	ınd	through a partr	archin	
3.2 Official name of fund or partr		shareholding .		3.3 Country of tax re				
o.z omela name er land er parti	Югогир			olo country of tax re	001001100 01 1	und of partiti	y codo	
3.5 TIN of fund or partnership (if	available	e)		3.6 Business ID of fund or partnership (if available)				
3.7 Name of payer *								
				3.9 Payer is stock-e	xchange	3.10 Date of payment		
3.8 Payer's ISIN *				listed *		(ddmmyyyy) *		
				L, –	٦.,			
				Yes	No	2.14 Amount requested		
3.11 Number of shares *	3.12 G	ross amount of divide	end *	3.13 Amount of tax v	withheld *	3.14 Amount requested as refund *		
		€	С	€	С	€	С	
0.45 Danasa and the same and		- E - 15 - 2 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1						
3.15 Because more than one pay							oor(o)	
I completed Form 6167e. The 3.16 Give the name of the foreign							ear(s).	
		calary barm(c) manar	ing an	o dividona paymoni (i	viariaatory ii	Tionimos registerea enare.)		
3.17 On what grounds do you se	ek refun	d? *						
Based on tax treaty		On other grounds, w	hat [.]					
•								
4 Interest payments or Royalti	es (Fill i	n only if you seek t	ax-at-	source refund of int	erest or roy	/alties.)		
4.1 Name of payer *								
4.2 Date of payment (ddmmyyyy) *	4 3 Am	ount of the income *		4.4 Amount of tax w	ithheld *	4.5 Amount requested		
= = == == (ddfillifffff)		€	С	€	С	as refund * €	С	
		-	Ť		- 	1	†	
4.6 On what grounds do you see	k refund	7 *				•	-	

On other grounds, what:

Based on tax treaty





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5.1 IBAN account number (or other int'l format) *					5.2 BIC or SWIFT *		
5.3 Name of account holder *					5.4 Name of bank		
5.5 Addross of bank				5.6 Postal code	5.7 Post office		
5.5 Address of bank			3.01 Ostal Code		3.7 Fost office		
500			I a a a a a a		5 40 01		
5.8 Country			5.9 Customer reference i	no for facilitating the payment	5.10 Clearing code		
6. Information on the a	gent si	gning this appl	lication form. Encl	ose letter of authoris	sation.		
6.1 Representative's name					6.2. Representative's identifier		
6.3 Address				6.4 Postal code	6.5 Post office		
6.6 Country		6.7 Telephone	number		6.8 e-mail		
		•					
6.9 Letter of authoris	ation is	enclosed with th	his form.				
6.9 Letter of authorisa	ation is	enclosed with the	his form.				
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6.9 Letter of authorisa				sed.			
A certificate of tax res				sed.			
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