Inland Revenue
P O Box 99
Brades
Montserrat

IRD 1

EMPLOYEE DECLARATION

Employee's Last Name:

Employee's First Name(s):

Residential Address:

Postal Address (If different from residential address):

Phone number (Residential):

Phone number (Business):

Are you paying mortgage interest on a residential property? Yes No

If yes. Enter the amount of annual mortgage interest (Maximum $5,000) **$**

Name of primary employer:

Employee's Signature: _____ ***Date:*** _____

FOR OFFICE USE ONLY:

IRD Number:

Tax Code:

Officer's Name: _____ ***Date:*** _____