

Receipt number	Business Registration Form(For individual) (For Taxpayer ID for taxpayers other than company)	Processing period
		5 days (not include correction period)

The information you provide is maintained permanently and is used for compliance analysis. Please complete this Form based on the correct information, and sign the third box of Part 3 on page 2.

1. Personal Information

Name of Company		Telephone	(Office)
Name (representative)			(Home)
Resident registration No.			(Mobile)
Business Address		Fax	
		E-mail	
		Do you wish to receive the NTS newsletter?	Yes () No ()

2. Business Profile

Business type/item	Main type		Main item		Main business code	Date of business commencement	Number of employees	
	Sub type		Sub item		Sub business code			
Office information	Self-owned	Lease	Leaseholder(Lessor)			Lease information		
	m ²		m ²	Name (Company)	Business registration no.	Resident registration (business) no.	Lease period	Deposit
							KRW	KRW
Your business is subject to	Declaration() Permission()		Registration() N/A()		Liquor license	License no.	Application for license Yes()No()	
Which is subject to selective excise tax?			Manufacturing() Place()			Sale() Entertainment()		
Total business funds (including lease deposit)			Equity capital		KRW	Loan	KRW	
Estimate amount of annual sales		KRW			Do you wish to apply Simplified taxation in VAT		Yes() No()	
Others	Firm date of certification (Where you are lessee)	Do you wish to register joint business?		Do you wish to register a mail address other than your business place?		Business registration number of seller (Fill in the box in the case of acquisition of business)		Is there a sub place of business newly established under the taxpayer for taxation on a unit basis?
	Yes() No()	Yes() No()		Yes() No()				Yes() No()

