

## COMMONWEALTH OF THE BAHAMAS DEPARTMENT OF INLAND REVENUE LARGE DEVELOPER PROGRAM APPLICATION FORM FOR CONTRACTORS

## A. CONTRACTOR INFORMATION

1. TIN of Contractor:	
2. Contractor Registered Name:	
3. Contractor Trade Name:	
4. Contractor Business Licence Number (BL#):	
5. Contractor National Insurance Board Number (NIB#):	
6. Contractor Filing Frequency	
8. Development's Registered Name:	
9. Development Location	

## B. SUBCONTRACTOR INFORMATION

\*Please attach contracts related to the contract # and contract values listed when submitting this application.

7. TIN	8. Registered Name	9. NIB #	10. BL#	11. Contract #	12. Contract Value(\$)		
*Please note that the filing frequency for all approved contractors' and suppliers' VAT Returns will be on a monthly basis if approved.							
C. SIGNATURE	I						
13. Name of Au	thorized Person						
14. Title of Auth	norized Person						
15. We hereby declare that the information provided is true, correct and complete to the best of our knowledge and belief, and that we have the authority to make this disclosure of information and declaration.							
16.							
17. Signatu	ure of Authorized Person	-		18.	Date		