



MINISTRY OF FINANCE AND ECONOMIC MANAGEMENT

Revenue Management Division

RM 1

P.O. Box 120, Avarua, Rarotonga. Telephone: (682) 29-365 Facsimile: (682) 29-465

INDIVIDUAL - APPLICATION FOR RMD NUMBER

Office Use Only

Please answer all the questions and make sure you sign the declaration

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RMD number issued / confirmed

1. Name: Title Mr Mrs Ms Other

Surname

First name(s)

2. If you have ever used another name show it here (for example, a maiden name).

3. **Mailing address** - Print your usual mailing address

4. Contact telephone, fax and email details:
Work Home
Mobile Fax

Email:

5. What is your **date of birth**?
day month year

6 Passport Birth Certificate

7. Declaration

I declare that the information given on this form is true and correct.

Signature

Date