

HMRC Charities application form

About this form

This form is designed to be downloaded and saved on your computer and completed on screen. **Please complete all of the sections.** When you have finished completing the form you will need to print it and then sign and date it. Please note that any amendments made to the form after you have printed it will not be accepted. If you need to make any changes, you will need to amend the form on your computer and then print off a new version. The completed form should be sent to:

HM Revenue and Customs, Charities New Cases SO708, PO Box 205, BOOTLE, L69 9AZ

When to use this form

You need to complete this form if you are an organisation that wants to make claims for the Gift Aid scheme or other paying the of tax or if we have asked you to provide us with more information about your organisation. If you want to register as Courn nity Amateur Sports Club do not use this form but complete form CASC(A1). Please complete this form in English of Welsh If you don't it will take longer to process your application. Please refer to the <u>guidance</u> on the HMRC website to helptyou file a this form.

Section 1 - The organisation

1	Full name of the organisation		Have you registered with a clarity regulator in the country in whom, but as a sablished?
2	Name that your charity operates under if different from the name entered at question 1	5	If respenter the name of the regulator and your egistration number (if there is one) below and enclose a convolve registration notification from the regulator hame of regulator
3	Phone number including international dialling code if outside te UK	,	Your registration number
4	Email address if you have one		If you have not registered with a regulator please give your reasons below
5	Address For a company this must be the registered office address		
1	Powde Country	9	Unique Taxpayer Reference (UTR) if you have one
6	Correspondence address if different		Company Registration Number if you have one
	Postcode		var registration number it you have one
	Postcode Country	11	VAT Registration number if you have one

Section 2 – Brief details of the person making this application

This section should be completed by an authorised official or a responsible person within the organisation (not an agent)

12 Full name

14 What is your relationship with the organisation? For example, authorised official, trustee, director

Phone number including international dialling code if outside the UK

We will ask for your full details in your capacity as a responsible person or authorised official in the Sec rity information section.

Section 3 – Governing document This is the document that sets up your of resisation

Please tick the appropriate box to show the type of document and enclose a copy of the latest version

Rules/constitution

Trust deed

Memorandum and articles of association (or equivalent if you are not established in the UK)

Will

Act of Parliament (or similar legislative measure)

Other

Enter the date when the current dod prent b came effective. *DD MM YYYY*

Has your organisation used form of governing document approved by a national association, parent body or principal acquiate.

For example, if you are a Community Association your parent organisa on may provide you with a model continuous.

If 'No' go to question 20

18 Has the exact wording of the approved document been used?

No

Yes If 'Yes' go to guestion 20

19 Please highlight the changes you have made on the copy of the document that you send us and explain in the box below why these changes have been made.

Section 4 – Operations and funds

20	Are financial accounts for your organisation available?	Will your organisation be operating outside your local area?
	Yes If 'Yes', enclose a copy of the most recent ones and go to question 23	No If 'No', go to question 28 Yes
21	Enter the estimated gross income for the first full year or current year of operation	Where will your organisation be operating? For example, regionally, nationally or in another co., by
	Please enter all values in pounds sterling using the exchange rate on the date this form is completed.	
	£	
22	How much income has been received to date?	
	£	
23	How will funds be raised in the future?	
24	Please tick the box to confirm that you have	you are established in one country but will be operating anothe country please tell us which other countries you have be operating in
	enclosed copies of statements for the organisation's main bank account for the last three points	
	If you are unable to exclose copie of bank statements please say why in the below	
1		

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Section 6 – Security information See guidance for explanation of responsible person and authorised official

	Responsible person or authorised officia	al	
29	Name	32	Previous home address if address changed in the last 12 months
	What is this person's position within the organisation? (For example trustee, director, treasurer. Where they hold more than one position please list them all.) Also please state whether they are an "Authorised Official" or "Responsible Person." See guidance for more details.		Postcode Country
30	Phone number including international dialling code if outside the UK	33	Date of birth DD MM YY
31	Home address	34	National Insurance number (UK only)
	Postcode	7	If this person doe not have a National Insurance number of me t enclose documents to verify their identity. One these bust be a copy of their passport page showing the electrograph, or a similar photo Identification. The her must verify their address – for example, a utility bill.
	Country	35	National Identity card number (if outside the UK)
	Q.	36	I confirm I have read the HMRC Fit and Proper Persons guidance which is available on the HMRC website
			Signature of above person
			To be signed on your printed version

Section 7 – Nominee and collection agency information See guidance for explanation of nominee and collection agency

	Nominee		
37	Name of the individual or organisation	42	Previous address if address changed in the last 12 months
38	If an organisation, please enter the name of an individual within that organisation authorised to deal with HMRC		Postcode
39	If a collection agency enter their reference as explained in the guidance	43	Country Date of birth DD MM YYYY
40	Phone number including international dialling code if outside the UK	44	National Insurance Lumber VK Only)
41	Address if the nominee is an individual enter their home address	>	If this person does no have a National Insurance number you must enclos documents to verify their identity. One of the must be a copy of their passport page showing leir photograph, or a similar photo Identification. The other must verify their address – for example, a utility bill.
	Postcode Country	5	national Identity card number (If outside the UK) or company registration number
46	Do you want this nominee to receive a symbols of behalf of your organisation? No If 'No', go to section 8	50	Sort code If the account is with a building society enter the roll or
	If 'Yes' please enter the nominee's bank et als be wise that we can make pay sents discetly into their account. If you are using a collection agency you do not	51	reference number if you have one.
1	need to provide details in this section but need to provide details in this section but need go to section 8. No	52	Name of the bank or building society For a Post Office card account enter 'Post Office'
48	Name the account is in as shown on the statement	53	Date account opened DD MM YYYY
	This account must be able to receive payments by Bacs Direct Credit.	54	Signature of above person
49	Account number		To be signed on your printed version

Section 8 – Your organisation's bank details

5 Will you be claiming repa	ayment of tax for:	58 Sort code	
Gift Aid? N	o Yes		
Other income? N	o Yes	59 If your account is with a	building society enter the roll or
Full name of bank accou	ınt	reference number if you	have one
as shown on the bank st			X
		60 Name of your bank or bu	uilding society
		For a Post Office card ac	
Account number			\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \
			X
		Date account opened	- MM VY
		4 1	
ction 9 - Declar	ration		
	the person named in box 12 who		
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For further advice, or for any of our forms, go to our website at www.hmrc.gov.uk/charities

How we use your information

HM Revenue & Customs is a Data Controller under the Data Protection Act 1998. We hold information for the purposes specified in our notification to the Information Commissioner, including the assessment and collection of tax and duties, the payment of benefits and the prevention and detection of crime, and may use this information for any of them.

We may get information about you from others, or we may give information to them. If we do, it will only be as the law permits to:

- · check the accuracy of information
- · prevent or detect crime
- · protect public funds.

We may check information we receive about you with what is already in our records. This can include information provided by you, as well as by others, such as other government departments or agencies and overseas tax and customs authorities. We will not give information to anyone outside HM Revenus? Customs unless the law permits us to do so. For more information go to www.hmrc.gov.uk and look in Data Protection Act within the Search facility.