



Canada Revenue Agency
www.cra.gc.ca

Dear Mr.

Our records indicate insufficient information for your income tax return. As a result, you have been exempt from the Canadian Tax reporting and withholdings on claims to be paid to you. To apply for your claims

We have been required by law to update our records in order to rectify your exemption status.

Therefore, you are to Use this form to claim your benefit or SR&ED carried out in Canada during this year. authenticate the following by completing form Schedule T2, and return to us as soon as possible through the fax number: 1 or send through attachment to the E-mail

When completing form T2, please follow the steps below

1. We need you to provide your permanent address if different from the current mailing address on your Form T2. You must indicate your country of origin to support your resident status (if your bank account or other financial dealing has a Canada address for mailing purpose).

If any joint account holder are now Canada residents or Citizen, or in any way subject to Canada tax reporting laws, please check the box in this section.

All account holders sign and date the form separately and fax it to above-mentioned number. Please complete Form T2 "attached" and return to us within 2 (two) weeks from the receipt of this letter in order to enable us **update your records immediately.**

If you do not meet this reporting deadline, we may reject your claim or it will be subject to Canada tax reporting and back up withholding (if back up withholding applies, we are require by law to withhold 30% of the benefit paid to you.

On this form, references the Act are to the *Income Tax Act* References to the Regulations are to the *Income Tax Regulations*.

We appreciate your cooperation in helping us protect your exempt status and also update our records.

PART 1: IDENTIFICATION OF BENEFICIAL OWNER (S)

1. Your family name and title other names Sex

2. Nationality Date of Birth Place of birth Social Insurance number

3. Business Number Your Mother Maiden Name Passport Number

4. Country of permanent Residence Spouse Name

5. (A) Foreign Bank Name and Branch Address (B) Local Bank Name and Branch Address

6. Account No (a)	<input type="text"/>	Account No (b)	<input type="text"/>
7. Account Type (a)	<input type="text"/>	Account Type (b)	<input type="text"/>
Date Account was opened (a)	<input type="text"/>	Date Account was opened (b)	<input type="text"/>

9. State your mailing Address

10. Profession

11. Day time phone/ fax Number

12. How often do you come to Canada and when did you arrive last? Yes No

13. Are your spouse and children living in your country of residence? Yes No

14. Are your parents and relations living in your country of residence? Yes No

15. Kindly attached the copy of your international passport with your filled form for proper identification.

PART 11. CERTIFICATION

Under penalties of perjury, I/ We declare that I/We have examined this form, and to the best of my/our Knowledge and believe, the information is true, correct and complete.

PART 111. SIGNATORIES:

Signature Name Date

Your Signature Name Date