



Application by Non-Resident for a Directive for Relief from South African Tax for Pension and Annuities in terms of a Double Taxation Agreement

RST01

Information:
Form to be completed by a resident of a foreign country who claims relief from South African (SA) tax in respect of pension and annuities in terms of a Double Taxation Agreement. For a refund please complete the RST02 form.
This form, when completed, should be taken to your local tax office for certification in your country of tax residence. Once certified post the original form to the South African Revenue Service (SARS): Private Bag x923, Pretoria, 0001
For each source of Pension/Annuity, complete the relevant schedule.

Applicant Details – Individual

Country of Tax Residence
National Identification Number in Country of Tax Residence
Surname
First Name
Other Name
Initials
Date of Birth (CCYYMMDD)
Country of Birth

SA ID No. Tick here if you do not have a SA ID number:

Taxpayer Reference Number(s)

South African Taxpayer Reference No. Foreign Taxpayer Identification Number in country of Tax Residence

Contact Details

Fixed Line Telephone No. Mobile No.
Email

Physical Address Details

Unit No. Complex (if applicable)
Street No. Street / Farm Name
Suburb / District
City / Town Country code
Postal Code

Declaration by Applicant

I declare that the information furnished in this return is true and correct in every respect.

Date (CCYYMMDD)

Signature

Postal Address Details

Mark here with an "X" if same as your physical address or complete your Postal Address.

Is your Postal Address a Street Address?

Y N

Mark here with an "X" if this is a "care of" address

Postal Agency or Other Sub-unit (if applicable) (e.g. Postnet Suite)

PO Box

Private Bag

Other PO Special Service (specify)

Number

Post Office

Country Code

Postal Code

Unit No.

Complex (if applicable)

Street No.

Street / Farm Name

Suburb / District

City / Town

Country code

Postal Code

Certificate by Country of Tax Residence

To be completed by the relevant Tax Office in your country of tax residence.

Name of applicant

Tax Reference Number

Date from which you were a tax resident (CCYY):

Name of Country

Tax official: Surname

Tax Official: Designation

Tax Official: Initials

Declaration (by the Relevant Tax Office in the Country of Tax Residence)

I hereby certify that the applicant is a resident and is liable to taxes in this country under the reference number stated above (if applicable)

Date (CCYYMMDD)

Signature

Official Stamp

Postal Agency or Other Sub-unit (if applicable) (e.g. Postnet Suite)

PO Box Private Bag Other PO Special Service (specify)

Number

Post Office

Country Code

Postal Code

Unit No. Complex (if applicable)

Street No. Street / Farm Name

Suburb / District

City / Town

Country code

Postal Code

Schedule: **Annuity**

Details of Retirement Fund or Insurer

Name of Fund/
Insurer

Is this an annuity attributable to past membership of an occupational fund? Y N If 'Y' complete the "History of Employment while a contributing member of an occupational fund" section.

Nature of
Annuity

If nature of Annuity is 'Other' please specify below:

Member's Pension/
Policy No.

Tax period for which the directive is required from: March to February (CCYY)

History of Employment while a Contributing Member of the Occupational Fund

Date From:
(CCYYMMDD)

Date To:
(CCYYMMDD)

Name of
Country

Contributions R

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Registered Postal Address of the Retirement Fund or Insurer

Is your Postal Address a Street Address?

Y N

Postal Agency or Other Sub-unit (if applicable) (e.g. Postnet Suite)

PO Box Private Bag Other PO Special Service (specify)

Number

Post Office

Country Code

Postal Code

Unit No.

Complex (if applicable)

Street No.

Street / Farm Name

Suburb / District

City / Town

Country code

Postal Code