

How to apply for an Irish Tax Clearance Certificate

Under Irish tax regulations, when you receive funds from a public body, such as TU Dublin your company may be required to provide a Tax Clearance Certificate (TCC). This can apply whether you have a business in Ireland or outside Ireland or if your business does not pay tax in Ireland.

The process to apply for a non-resident TCC is quite straightforward. You need to complete the online form ([TCC1](#)) and email it to nonrestaxclearance@revenue.ie. Once you correctly complete the form, it normally takes about six weeks to get your TCC. Remember you may need to renew the TCC each year.

TC1 Application for a Tax Clearance Certificate



This application form is only to be used by the following applicants:

1. Applicants who require Tax Clearance but are non e-Enabled, see Note 1.
2. Applicants who are not resident and not tax registered in this State, see Note 2.
3. Charities / voluntary bodies not registered for tax or do not possess a CHY Number, see Note 3.

PPSN:(Personal Public Service Number) Not applicable to Non-Resident applicants

YOU DO NOT NEED TO COMPLETE THIS

Applicant Name:

USE THE LEGAL NAME OF THE COMPANY. THIS SHOULD MATCH THE NAME ON THE INVOICE YOU SUBMIT TO TU DUBLIN

Applicant Address:

Reason for Tax Clearance Application:

ENTER "To receive payment for services from TU Dublin"

Additional Information for Contract, Licence or Grant applications

Type of Contract, Licence or Grant:

ENTER "Fulfillment of contract"

Where will the work be carried out:

COUNTRY WHERE HEADQUARTERS IS LOCATED

If Applicant is Non-Registered and Non-Resident

Tax Registration In Country of Residence:

Country of Residence:

Tick relevant Box:

Supply of Goods Supply of Services Supply of Goods & Services

Have you previously applied for Tax Clearance? Yes No

If Yes, please provide your Registration Number.

If Applicant is or was a member of a Partnership: If you are a limited company leave this blank, otherwise see Note 4 below

Name of Partnership:

Applicant's period of Membership:

Tax Reference of Partnership:

Any other connected parties:
(See Note 4)

The information provided in this form is true and correct to the best of my knowledge and belief. I have included all information relevant to this application.

Signature: _____

Date: _____

Name:
(Block Letters) _____

Telephone Number: _____

Email Address: _____