



Jamaica

APPLICATION FOR EXEMPTION ON CONTRIBUTIONS TO AN APPROVED RETIREMENT SCHEME

(Pursuant to Section 13(1)(u) of the Income Tax Act)

PRINT

RESET FORM

Section A - GENERAL INFORMATION																	
1. Name of Applicant (Last, First, Middle):		2. Taxpayer Registration Number (TRN): (branch number) □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □															
3. Applicant's Home Address (Apt. No., Street No. & Name, Postal Zone, Parish)		4. Date of Birth (mm/dd/yyyy): 5. Telephone Number: 6. Administrator's TRN (branch number) □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □															
Section B - EMPLOYMENT INFORMATION		8. Employer's TRN (branch number) □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □															
7. Name of Employer:																	
9. Business Address (Apt. No., Street No. & Name, Postal Zone, Parish)		10. Employee's Gross Statutory Income \$															
Section C - DETAILS OF APPLICATION																	
11. List the names of all the Approved Retirement Scheme in which you are a member (active and deferred) and indicate the date of admission to the scheme: <table style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th style="width: 50%;">Name of Retirement Scheme</th> <th style="width: 20%;">Date of Admission</th> <th style="width: 30%;">Status (Active or Deferred)</th> </tr> </thead> <tbody> <tr><td>_____</td><td>_____</td><td>_____</td></tr> <tr><td>_____</td><td>_____</td><td>_____</td></tr> <tr><td>_____</td><td>_____</td><td>_____</td></tr> <tr><td>_____</td><td>_____</td><td>_____</td></tr> </tbody> </table>			Name of Retirement Scheme	Date of Admission	Status (Active or Deferred)	_____	_____	_____	_____	_____	_____	_____	_____	_____	_____	_____	_____
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_____	_____	_____															
_____	_____	_____															
_____	_____	_____															
_____	_____	_____															
12. What is/are the contribution rate(s) to the active Approved Retirement Scheme(s) listed above? <table style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th style="width: 50%;">Name of Retirement Scheme</th> <th style="width: 20%;">Employer's Contribution Rate</th> <th style="width: 30%;">Employee Contribution Rate</th> </tr> </thead> <tbody> <tr><td>_____</td><td>_____</td><td>_____</td></tr> <tr><td>_____</td><td>_____</td><td>_____</td></tr> <tr><td>_____</td><td>_____</td><td>_____</td></tr> <tr><td>_____</td><td>_____</td><td>_____</td></tr> </tbody> </table>			Name of Retirement Scheme	Employer's Contribution Rate	Employee Contribution Rate	_____	_____	_____	_____	_____	_____	_____	_____	_____	_____	_____	_____
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_____	_____	_____															
_____	_____	_____															
_____	_____	_____															
_____	_____	_____															
13. Does your employer operate an Approved Superannuation Fund in which you are a member or eligible to join? ☐ Yes ☐ No 13a. If 'yes', what date did you become a member or eligible to join? _____ 14. What is the name of the Approved Superannuation Fund? _____ 15. What is the contribution rate to the Approved Superannuation Fund in which you are a member? Employer _____ Employee _____																	

Section C - DETAILS OF APPLICATION (continued)

16. What is the nature of employment with your current employer?

☐

Part-time

☐

Full-time

☐

Casual

☐

Contract

☐

Other

17. What is the name of your previous employer?

18. Are you a deferred member of an Approved Superannuation Fund? (i.e. a former member of the fund who at retirement is entitled to pension from the fund)

☐

Yes, (complete questions 19 and 20)

☐

No

19. State the fund(s) of which you were a member:



20. Will any accumulated contributions be transferred from the Fund(s) listed above or the Scheme(s) listed at question 11 to this new Approved Retirement Scheme?

☐

Yes

☐

No

If 'Yes', indicate if it is the fund or the scheme or both

☐

Superannuation Fund

☐

Retirement Scheme

☐

Both

21. Was a previous application made and rejected?

☐

Yes

☐

No

If 'Yes', what was the reason for the rejected application?



Section D - SUPPORTING DOCUMENTS

Kindly attach the following to the Approved Retirement Scheme (ARS) application form



Copy of ID



Copy of TRN



Copy of application enrollment form to the ARS or annual statement if you are already a member



Copy of pay slip (no older than one month)

Section E - FOR OFFICIAL USE

To be completed by Tax Administration Jamaica



Is the application form completed?

☐☐

Are all the required documents submitted?

☐☐

Which documents were not submitted?



Is the application approved or rejected?

☐☐

What is the basis of the rejection?

Approved by

Date