



LAGOS STATE GOVERNMENT
BOARD OF INTERNAL REVENUE
THE GOOD SHEPHERD BUILDING
 BLOCK H, PLOT H1, CENTRAL BUSINESS DISTRICT
 OPPOSITE LAGOS STATE SECRETARIAT MAIN GATE, ALAUSA
 Ikeja, LAGOS STATE
www.lasg-eps-rcm.com

Form No.

Individual Data Input e-TCC Form

Supply All Information in Ink and in Block Letters

INDIVIDUAL INFORMATION (To be supplied by the Taxpayer)

1	Surname																				
2	First Name																				
3	Middle Name																				
4	Date of Birth			-			-														
5	Title							(Mr, Mrs, Miss, Chief, Dr, Alhaji etc)													
6	Sex	Male ☐ Female ☐																			
7	Marital Status	Single ☐ Married ☐ Separated ☐ Widow ☐ Widower ☐ Divorced ☐																			
8	Taxpayer ID							Bank Verification No. (BVN)													
9	House/Flat No.																				
10	Street Name																				
11	Town/Area											LGA/LCDA									
12	State																				
13	National ID NO																				
14	Mobile Phone No																				
15	Nationality																				
16	Tax Station Name																				
17	Employment Type	Employee ☐ Contract ☐ Political Appointee ☐ Self Employed ☐ Tick as Appropriate																			
18	Occupation																				
19	Profession																				
20	Maiden Name																				

Income And Tax Paid for the Last Three Years.....

		Year 1				Year 2				Year 3							
21	Income Year																
22	Income																
23	Tax Paid																
24	Signature and Date																
I certify that the Taxpayer referred above has met all requirements necessary for the processing of his/her Electronic Tax Clearance Certificate (e-TCC)																	
25	Authorised Coy Rep. (e.g. Accountant)																
26	Signature and Date																
27	Authorised by (e.g. Head Tax Station)																
28	Signature and Date																

Affix your passport
 photograph here
 with gum only
 Please do not staple

29	Email Address	
30	State of Origin	
31	Company Name	
32	Company Branch	
33	Company Address	
34	Web Address	
35	Official Position	
36	International passport No	
37	Alien Registration No	
38	Names and addresses of previous Employers	From.....To.....
		From.....To.....
		From.....To.....
		From.....To.....
39	If Married State Spouse's Name	
40	Spouse's Occupation	
41	Spouse's Business or Employment Address	