



TO,  
COMMISSIONER GENERAL,  
ZANZIBAR REVENUE AUTHORITY,  
P.O.BOX 2072,  
ZANZIBAR.

### APPLICATION FOR REMISSION OF INTEREST AND PENALTY DEBT ASSESSMENT

**Z NUMBER/ZTN**.....

**FULLNAME OF BUSINESS**.....

**NAME OF ELIGIBLE PERSON**.....

**PHYSICAL PLACE OF BUSINESS**.....

**MOBILE NUMBER**.....

**OTHER TELEPHONE NUMBER**.....

**EMAIL ADDRESS**.....

I.....on  
behalf of .....(name of entity/ person)  
applying for interest and penalty remission of TZS/USD relating to the following eligible tax.

Tax type	Assessment Year	Currency	Principal Amount	Interest	Penalty	Amount Paid	Total Liability
		TZS/ USD					
		TZS/ USD					
		TZS/ USD					
		TZS/ USD					
		TZS/ USD					

### DECLARATION

I Hereby declare that the information given on this form and any accompanying documents are correct, complete and contain a full true statement of tax liability to the best of my knowledge and belief.

### Applicant

Signature .....

Designation /Position .....

Date .....

### ZRA Official

Comment.....

Signature.....

Date .....