

This form is to be used by persons who are not residents of Sweden and, for example,

- stays in Sweden or on board a Swedish merchant vessel for less than six months or
- receive Swedish pension

Your passport or other document of identification has to be produced or copy to be attached.

**Applicant**

Surname		Date of birth or Swedish Tax Identification No.			
		Year	Month	Day	Number
Earlier surnames		Tax Identification Number in the country of residence			
Given names in full		<input type="checkbox"/> Man <input type="checkbox"/> Woman			
Address in Sweden		Occupation			
Residence in Sweden from		until	Previous residence in Sweden during the last twelve-month period		
Nationality		Country of residence			
Address in the country of residence					

**Income from temporary employment, assignment, work as a trainee, board membership, etc**

Name and address of the employer		Tax Identification No.	
		Telephone No.	
Salaries, wages and similar remuneration (including expense allowances)		Reimbursement of payments for travels to and from Sweden and accommodation in Sweden (not included in the income)	
SEK		SEK	
Period of work	Nature of work		
Is it a public performance by an artiste or a sportsman? <input type="checkbox"/> Yes <input type="checkbox"/> No			
Is the employment/assignment exercised in Sweden? <input type="checkbox"/> Yes <input type="checkbox"/> No		Municipality	Country
Is it income from employment on board a Swedish merchant vessel? <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Partly		Name of ship	

**Certificate for trainees**

<input type="checkbox"/> Employer's certificate indicating nature of work is attached.		<input type="checkbox"/> Certificate from educational institution indicating aim of study, program or combination of subjects is attached.	
Previous work as a trainee in Sweden during the income year			
Period of employment		Salaries, wages and similar remuneration	
		SEK	

**Pension Income**

When did you leave Sweden? (Please state date and municipality in which you were registered)

Date of emigration

Municipality

 Place of residence report is attached Certificate of residence abroad is attached

Pension paid by (name and address)

Type of pension

**Other income from Sweden**

Name and address of payer

Amount

SEK

Payment relates to

**Additional information and claims****NOTE! Incorrect particulars in the application may constitute violation of the tax law.**This form can also be down-loaded at [www.skatteverket.se](http://www.skatteverket.se)

Signature

Name, address, tel.no. of agent if applicable

Telephone-nr in the daytime

**Notes by the Swedish Tax Agency**