

## Application under a Double Taxation Agreement for an exemption from Icelandic Taxation of salaries, wages or pension

A notification of approval of the exemption will be sent to the payer of salaries, wages or pension.

The exemption is valid until the end of the year of issue and must be renewed at the beginning of each new year.

| Applicant  |   |   |   |  |  |
|--|---|---|---|--|--|
| Name   |   |   | Icelandic identification number   |  |  |
| Address (street)   | Sta   | ate of province   |   | Postcode   |  |
| Country  |   |   | Foreign identification number   |  |  |
| E-mail address   |   |   | Telephone number  |  |  |
| Information on payer of sala   | ary/pension   |   |   |  |  |
| Name   |   |   | Identification number   |  |  |
| Name   |   |   | Identification number   |  |  |
| Name   |   |   | Identification number   |  |  |
| Confirmation of fiscal reside Original copy. It is not nece Latvia, Portugal, and Spain Employment contract or a c employment contract (appli  Explanations of applicant   | essary to send an origing or if the document can confirmation by an emp | nal copy if the ce<br>be verified secu<br>loyer that the wo | rtificate is issued by the tax<br>rely.<br>rk is carried out abroad if th | authorities of Belgium, nat is not stated in the |  |
| The application can be sent to Skatturinn Katrínartún 6 105 Reykjavík Iceland  The original copy of the Certi  The applicant is aware the Confirmation of approved ap | ficate of Fiscal Resido<br>at the income is taxab                       | ence shall be so  | ent to the address hereab<br>declared in the country of                   |  |  |
| _  | Date  |   | Signature   |  |  |