DATA SHEET 17T101
FOR REGISTRATION AND REPORTING CHANGES
for private individuals who are obliged to obtain a tax number,
but are not registered as private entrepreneurs

This Data Sheet must be filled in two hard copies or one electronic copy.

TO BE FILLED OUT BY THE AUTHORITY

<table>
<thead>
<tr>
<th>Receipt/arrival</th>
<th>Code of receiving person</th>
<th>VAT-code</th>
</tr>
</thead>
<tbody>
<tr>
<td>Date of mailing</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Tax number</td>
<td>Community tax number</td>
<td></td>
</tr>
<tr>
<td>Customs identification number</td>
<td>place of stamp</td>
<td></td>
</tr>
</tbody>
</table>

Starting/finishing date of effect of community tax number

date
signature

TO BE FILLED OUT BY THE TAXPAYER

1. Registration number of the Data Sheet to be corrected, based on the notice of the National Tax and Customs Administration
   It must be filled out in the cases described in the instructions.

2. Type of registration (Registration: [1], reporting changes in data [2], registration following cancellation of tax number: [3])
   Please establish a tax number
   Please establish a customs identification number
   EORI number (a customs identification number for any customs procedure and fulfilment of registration tax liability) [1]
   VPID number (a customs identification number exclusively for meeting registration tax liability) [2]
   Effective date of change
   This section must be filled out in case of reporting changes in data.
   If the taxable activity is terminated, please write the date of such termination here.
   
   
   year
   month
   day

4. Surname and forename

5. Tax identification number
   Has no tax identification code
   Data Sheet T34 is attached

6. Tax number

7. EORI/VPID number issued in Hungary
   One of the above customs identification numbers must be filled out in the case of reporting changes in data or registration following cancellation of tax number.

8. Telephone number

8. Detail sheets and supplementary sheets filled out
   Detail sheets
   Supplementary sheets

I acknowledge that, pursuant to Article 24 (9) of the Act on the Rules of Taxation, the tax authority shall refuse to issue a tax number if the data provided by the taxpayer are false or insufficient, and/or, pursuant to Article 24 (10) c) of the Act on the Rules of Taxation, the tax authority shall delete from the records of taxpayers the taxpayer who registers termination of his activity, or whose authorisation to pursue his activity is canceled.

Being aware of my legal liability I declare that the data provided above do reflect the truth.

Date and place

Please mark with an X if you are a proxy and your Power of Attorney is attached

Please mark with an X if you are a permanent proxy duly registered with the National Tax and Customs Administration and entitled to sign this Form.

name of taxpayer or representative/proxy in capital letters

signature of taxpayer or representative (proxy)

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## Registration for the first time

To be filled out when applying for a customs identification number

Data to be filled out in the case of a non-Hungarian citizen private individual:

<table>
<thead>
<tr>
<th>Nationality:</th>
<th></th>
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</table>

<table>
<thead>
<tr>
<th>Type of document (1,2,3)</th>
<th>Number of document</th>
<th>Date of issue</th>
<th>Date of expiration</th>
<th>Country code of issuing authority</th>
</tr>
</thead>
<tbody>
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</tbody>
</table>

Contact for electronic communication (e-mail address):

__________________________

Data to be filled out both for Hungarian and non-Hungarian citizen private individuals:

I give my consent to my EORI number, name and seat address being published

### Statement relating to the fixed-rate tax of small taxpayer enterprises

I register under the fixed-rate tax of small taxpayer enterprises, and I also register myself as a private individual small taxpayer

Social security identification number

I classify as a full-time small taxpayer

As a full-time small taxpayer, I hereby declare that my social insurance shall become effective from this declaration onward

Being a full-time small taxpayer, I register that I opt for the payment of a higher amount of itemized tax (i.e. HUF 75 thousand), pursuant to Article 7 (3) of the Act on the fixed-rate tax of small taxpayer enterprises and small company tax

### Statement on the name of attorney

Name of attorney (at law) ________________________________

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### Data of the legal representative

<table>
<thead>
<tr>
<th><strong>Name</strong></th>
<th><strong>Nationality</strong></th>
<th><strong>Telephone number</strong></th>
</tr>
</thead>
<tbody>
<tr>
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</tbody>
</table>

**Tax identification code:**

**Has no tax identification code:**

**Place of residence:**

- **name of public place:**
- **type of public place:**
- **postal code:**
- **number/topo-geographical lot number:**
- **number of building:**
- **staircase:**
- **floor, door:**

**Starting date of this legal relationship:**

**Date of termination, in the case of a fixed-term legal relationship:**

### Opting for a flat rate taxation or an itemized flat rate taxation, pursuant to Articles 50 and 57/A of the PIT Act

I have not been engaged in paying guest service activity so far, I opt for an itemized flat rate taxation in relation to my paying guest service provider activity.

I have not been engaged in private entrepreneur activity so far, thus - as per points b-f) of paragraph 17 of Article 3 of the PIT Act - I opt for a flat rate taxation in relation to my new private entrepreneur activity.

I have not been engaged in small agricultural producer activity so far, thus I opt for a flat rate taxation in relation to my new small agricultural producer activity.

### Terminating a flat rate taxation or an itemized flat rate taxation

In relation to my private entrepreneur activity, my eligibility to apply the flat rate taxation is terminated.

In relation to my small agricultural producer activity, my eligibility to apply the flat rate taxation is terminated.

### Termination of the ‘EVA’-taxpayer status

My ‘EVA’-taxpayer status terminated, pursuant to the EVA (simplified entrepreneurial tax) Act.

### Carrying out the activities of a lawyer, bailiff, notary public and patent administrator in an office

I continue my lawyers, bailiffs, notary publics or patent administrator’s activity in a lawyer’s, bailiffs’, notary public’s or patent administrator’s office.

### Application for a customs identification number, change in data of taxpayers already holding a customs identification number

#### Data to be filled out in the case of a non-Hungarian citizen private individual:

<table>
<thead>
<tr>
<th><strong>Nationality:</strong></th>
<th><strong>U/T</strong></th>
<th><strong>U/T</strong></th>
<th><strong>U/T</strong></th>
<th><strong>U/T</strong></th>
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<tbody>
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</tbody>
</table>

<table>
<thead>
<tr>
<th><strong>Type of document (1-2-3)</strong></th>
<th><strong>Number of document</strong></th>
<th><strong>Date of issue</strong></th>
<th><strong>Date of expiration</strong></th>
<th><strong>Country code of issuing authority</strong></th>
</tr>
</thead>
<tbody>
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</tbody>
</table>

### Contact for electronic communication (e-mail address):

### Data to be filled out both for Hungarian and non-Hungarian citizen private individuals:

- I give my consent to my EORI number, name and address of my residence/seat being published
- I withdraw my consent to my EORI number, name and address of my residence/seat being published given earlier

### Reporting discontinuation of private practice providing veterinary services

**Starting date of discontinuation:**

**Finishing date of discontinuation:**
Statement relating to the itemized taxation of small taxpayer enterprises
I register under the fixed-rate tax of small taxpayer enterprises, and I also register myself as a private individual small taxpayer

Social security identification number

I classify as a full-time small taxpayer.

As a full-time small taxpayer, I hereby declare that my social insurance shall become effective from this declaration onward.

Being a full-time small taxpayer, I register that I opt for the payment of a higher amount of itemized tax (i.e. HUF 75 thousand).

I register that my obligation, being a full-time small taxpayer, to pay a higher amount of itemized tax (i.e. HUF 75 thousand), pursuant to the Katv. Act (on the itemized tax of small taxpayer enterprises and small company tax) is terminated.

Reporting an exemption from the obligation to pay itemized tax of small taxpayers

Reporting change for year month

I report that I shall incur no itemized tax payment obligation in the marked subject month due to the following reason.

Please write the appropriate code as per the instructions.

Termination of the taxpayer status

I hereby report that I do not wish to apply the provisions relating to the itemized taxation of small taxpayer enterprises as of the last day of the month of this report.

My 'KATA' taxpayer status is terminated, and in parallel, I opt for a flat rate taxation for my private entrepreneur activity.

I hereby report incurring revenues as defined by the Act on Itemised Taxation of Small Businesses and by Paragraph (4) of Section 4 of Act CXLVII of 2012 on Small Business Tax, the date of which is

Statement on the name of attorney

Name of attorney (at law)
VAT Statements, requesting and terminating Community tax number

<table>
<thead>
<tr>
<th>Special reason for VAT taxpayer status</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. I sell new vehicles to the territory of the Community: [2].</td>
</tr>
<tr>
<td>2. I sell buildings or building sites in a series of transactions: [3].</td>
</tr>
<tr>
<td>3. I become a VAT subject due to intra-Community sales serving as the basis of tax exempt import of products, and I do not use an indirect customs representative for the tax exempt import of products: [4].</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Registration according to Article 22 (1) g) or j) of the Rules of Taxation</th>
</tr>
</thead>
<tbody>
<tr>
<td>I act as a tax warehouse operator as specified in Article 89A of the VAT Act.</td>
</tr>
<tr>
<td>I act as an indirect customs representative as specified in Article 96 of the VAT Act.</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Statement of VAT taxability due to termination of an EVA taxpayer status</th>
</tr>
</thead>
<tbody>
<tr>
<td>I make the statement of my choice to become VAT taxpayer due to the termination of my Eva taxpayer status.</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Preclusion of VAT taxability</th>
</tr>
</thead>
<tbody>
<tr>
<td>I do not classify as a VAT subject, pursuant to the following provisions of the VAT Act:</td>
</tr>
<tr>
<td>Article 5 (I carry out no economic activities as per the VAT Act): [1].</td>
</tr>
<tr>
<td>Article 7 (I carry out activities only as an organisation vested with executive powers): [2].</td>
</tr>
</tbody>
</table>

Method of assessment of the VAT payment obligation

If the method of taxation is changed, the whole section shall be filled out completely, also marking the unchanged lines as well.

If you opt for using the general rules instead of a special taxation method, or tax exemption, you must mark the appropriate point 1 as well.

1. I establish the VAT payment obligation as per the general rules. [1]

2. I establish the VAT payment obligation as per the general rules, due to exceeding the threshold entitling to a tax exempt status by subjective right. [C]

3. Being a dealer, I apply the provisions of Sub-chapter XVII of the VAT Act to this activity [G]

4. Being a dealer, I do not apply the provisions of Sub-chapter XVII of the VAT Act to the whole of this activity. [H]

5. In order to assess the amount of tax, I apply the global records-based method. [J]

6. I determine the taxable amount of the following supplies of goods according to the provisions of Article 217 of the VAT Act in connection with the direct importation of works of art, collectors' items or antiques by the dealer, or in connection with the acquisition of works of art directly from the artist, or from the legal heir of the artist. [K]

7. I establish the VAT payment obligation according to the special rules relating to the organiser of a public auction. [L]

8. I establish the VAT payment obligation by using the individual records-based method relating to tour operating service providers. [U]

9. For assessing tax on my tour operating service provider activities, I use the designated position number based records system. [M]

10. I render my activities of supplying investment gold to another taxpayer taxable. [N]

11. I render my agency activities of acting in the name and on behalf of another person supplying investment gold taxable. [O]

12. I establish the VAT payment obligation as per the general rules, instead of the agricultural compensation system. [P]

13. I choose taxability as per the general rules, instead of tax exemption, in case of letting or leasing real estate property [part thereof] not considered to be a residential property. [Q]

14. I choose taxability as per the general rules, instead of tax exemption, in case of letting or leasing real estate property [part thereof] considered to be residential property and non-residential property. [R]

15. I choose taxability as per the general rules, instead of tax exemption, in the case of selling certain non-residential buildings [part thereof] and the land belonging to them, as well as certain land [part thereof] which has not been built on. [S]

16. I choose taxability as per the general rules, instead of tax exemption, in the case of selling certain residential and non-residential buildings [part thereof] and the land belonging to them, as well as certain land [part thereof] which has not been built on. [T]

VAT exemption (not obliged to pay VAT)

1. I carry out only non-taxable activities due to the public benefit or other special nature of such activities. [6]

2. I opt for a tax exempt status by subjective right. [2]

3. Pursuant to Chapter XV of the VAT Act, I carry out activities considered to be agricultural activities, and I claim payment of the compensation surcharge. [7]

4. I opt for a tax exempt status by subjective right in addition to applying the agricultural compensation system. [8]

5. I waive the application of the agricultural compensation system, and opt for a tax exempt status by subjective right. [9]
7. Compliance with VAT payment obligations in (another Member State(s)
I comply with the VAT payment obligation in the following Member States by choice [1] due to exceeding threshold [2] [Please mark code 1 or 2].

<table>
<thead>
<tr>
<th>Austria</th>
<th>Denmark</th>
<th>Netherlands</th>
<th>Luxembourg</th>
<th>Portugal</th>
<th>Slovenia</th>
</tr>
</thead>
<tbody>
<tr>
<td>Belgium</td>
<td>Estonia</td>
<td>Ireland</td>
<td>Malta</td>
<td>Romania</td>
<td>Croatia</td>
</tr>
<tr>
<td>Bulgaria</td>
<td>Finland</td>
<td>Poland</td>
<td>United Kingdom</td>
<td>Spain</td>
<td>Croatia</td>
</tr>
<tr>
<td>Cyprus</td>
<td>France</td>
<td>Latvia</td>
<td>Germany</td>
<td>Sweden</td>
<td>Slovakia</td>
</tr>
<tr>
<td>Czech Republic</td>
<td>Greece</td>
<td>Lithuania</td>
<td>Italy</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

8. Requesting or terminating Community tax number
I request the establishment of a Community tax number. Reason (as per the instructions for filing out):

9. Registration based on Article 22 (5) or (6) or (8) of the Rules of Taxation
1. I belong to the group of taxpayers specified in Article 22 (5) of the Rules of Taxation, and the price of products I purchased in another EC member state during the tax year does not exceed EUR 10,000.

2. I belong to the group of taxpayers specified in Article 22 (6) of the Rules of Taxation, and the price of products I purchased in another EC member state during the tax year does not exceed EUR 10,000, but I opted for a VAT payment obligation in Hungary.

3. I am engaged only in activities not entitled to tax deductions, or I opted for a tax exempt status by subjective right. I am classified as a VAT subject of special status engaged only in agricultural activities. I do not have a Community tax number, and I provide services to or use the services of taxpayer(s) resident in another EC member state.

4. I am engaged only in activities not entitled to tax deductions, or I opted for a tax exempt status by subjective right. I am classified as a VAT subject of special status engaged only in agricultural activities and, while applying Article 20 (7) of the VAT Act, disclosed my Community tax number to the supplier of such goods.

10. Registration based on Article 80 (2) (b) of the VAT Act
In the case of sales of goods, providing services and purchasing products within the Community, if the tax base is expressed in a foreign currency the exchange rate officially published by the National Bank of Hungary (MNB) shall be used to convert it to HUF.

Starting date of the application of the exchange rate of the MNB (the earliest date shall be the date of submission of the Data Sheet).

11. Statement relating to cash accounting
I opt for cash accounting as per Chapter XIII A of the VAT Act. I hereby state that the preconditions serving as a basis for my option of cash accounting do prevail in my case. I hereby report that I stop applying cash accounting as per Chapter XIII A of the VAT Act.

12. Request for modification based on point (17) of Article 22 of the Act on Tax Procedures
As per sub-points (b)-(d) or (h)-(c) of point (1) of Article 22 of the Act on tax procedures, I hereby request the modification of my earlier choice. The change has no impact on the amount of tax, tax base, state subsidy taking into account the tax returns already submitted.
### 17T101 - SUPPLEMENTARY SHEET 1

**Activities**

**Name**

Tax identification code

Tax number

<table>
<thead>
<tr>
<th>URTM</th>
<th>ÖVTJ</th>
<th>Description</th>
<th>Type</th>
<th>Number of the operation license</th>
<th>Date</th>
</tr>
</thead>
<tbody>
<tr>
<td>1.</td>
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<td>2.</td>
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**Being aware of my legal liability I declare that the data I provided above do reflect the truth.**

Date and place: __________________________ signature of taxpayer or representative (proxy)

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17T101 - SUPPLEMENTARY SHEET 2

Branch offices

Name ____________________________

Tax identification code ____________________________

Tax number ____________________________


Address of branch office

U/T/M Number and date of operation license

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<td>7</td>
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</table>

Number of operation license: ____________________________

Date: ____________________________

town, township, etc.

Name of public place ____________________________

type of public place ____________________________

Number or topographical lot number: ____________________________

Number of building: ____________________________

Staircase, floor, door: ____________________________


Being aware of my legal liability I declare that the data I provided above do reflect the truth

Date and place: ____________________________

Locality: ____________________________

Year: ____________________________

Month: ____________________________

Day: ____________________________

Signature of taxpayer or representative (proxy):


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17T101 - SUPPLEMENTARY SHEET 5

Storage place of documents

<table>
<thead>
<tr>
<th>Name</th>
<th>Tax identification code</th>
<th>Tax number</th>
</tr>
</thead>
</table>

<table>
<thead>
<tr>
<th>Code of receiving person</th>
<th>Place of stamp</th>
<th>Signature</th>
</tr>
</thead>
</table>

| U/T Address of storage place of documents, electronic certificates and records |
|---|---|---|---|---|---|
| 1. | | | | | |
| 2. | | | | | |
| 3. | | | | | |
| 4. | | | | | |
| 5. | | | | | |
| 6. | | | | | |
| 7. | | | | | |

Being aware of my legal liability I declare that the data I provided above do reflect the truth

Date and place

Locality | Year | Month | Day |
|---------|------|-------|-----|

Signature of taxpayer or representative (proxy)

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