MIRA 904

Version 21.2

Adjustment/Refund Request

1. Taxpayer information
Details of the taxpayer who has paid an amount in excess

Taxpayer Identification Number (TIN)

Taxpayer Name

2. Amount paid in excess, and the period to which it relates

○ USD   ○ MVR

Start date of the period

End date of the period

3. What do you wish to do with the amount paid in excess?

○ (a) Adjust against other amounts I owe to MIRA

○ (b) Adjust against amounts another taxpayer owes to MIRA

○ (c) Refund

4. Details of the liability against which the amount should be offset
Complete ONLY if you ticked 3(a) or 3(b) above

Taxpayer Identification Number (TIN)

Start date of the period

Taxpayer Name
Complete only if you ticked 3(b)

Revenue Type

End date of the period

5. Details of the bank account to which the refund amount should be transferred
Complete ONLY if you ticked 3(c) above

Account Number

Account Name

Bank

Account Currency

6. Explanation
Use this box if you wish to elaborate on your request

Declaration

I declare that the information given on this application is true and correct and that I am authorised to sign this application. I understand that if any incorrect information is provided on this form, MIRA may reject this form or reverse any adjustments or refunds made pursuant to this application.

Title

First Name

Other Names

+(   )
Contact Number

Designation

Email Address

Date

Signature & Seal

For Office Use Only	
☐	Taxpayer does not owe any amount to MIRA
☐	Taxpayer has submitted all tax returns and other documents required to be submitted
☐	Taxpayer is unlikely to have any liabilities in the next 12 months under the revenue type being adjusted/refunded
☐	Input tax of the taxpayer is greater than output tax during the past 12 months
☐	The taxpayer records have been audited/reviewed

Received By

Received Date

Reference Number