

PLEASE RETURN COMPLETED FORM TO:

Office of the Revenue Commissioners Incentives Branch Dublin Castle Dublin 2

Email: fwtunit@revenue.ie Phone: +(353) 01 647 5000

IMPORTANT NOTES (please read before completing the claim form)

Please complete all sections in BLOCK CAPITALS.

This form is for claiming relief in respect of expenses incurred wholly and exclusively in relation to the provision of artistic services by a specified person to a qualifying film production.

Expenses must not have been reimbursed or be reimbursable and must have already been incurred before making the claim.

Any repayment due as a result of this claim will be made in Euro currency by the Revenue Commissioners by Electronic Fund Transfer (EFT), so please ensure the bank details are completed correctly.

Please ensure this claim form is signed and submit the completed form to the above address.

Part 1: CLAIMANT DETAILS

Name:	
Address:	
Country of Residence:	
Email Address:	
Phone Number:	
Tax Reference Number Country of Residence:	in
Period when artistic ser	vices were provided to a qualifying company:
From DD/M	M / Y Y Y TO D D / M M / Y Y Y
Name of Production Co which artistic services w	

Part 2: DETAIL OF EXPENSES

Please detail below a schedule of the expenses incurred, which have not been reimbursed or are not reimbursable, and which have been wholly and exclusively incurred in the provision of artistic services to the film production company. This could include for example:

- Airfares to and from Ireland
- Travel within Ireland
- Accommodation and subsistence
- Commissions or Agents' fees

Description of Expense incurred	Method of Calculation	Amount €
	Total Amount Claimed €	

PLEASE TICK ✓ THE APPROPRIATE BOX TO INDICATE IF:

1. This claim for expenses incurred is being made, prior to any payments being made by the qualifying film company, for the artistic services provided:

or

2. This claim for expenses incurred is being made, after payments have been made by the qualifying film company, for artistic services provided:

IMPORTANT NOTE: IF EXPENSES CLAIM IS BEING MADE AFTER PAYMENTS HAVE BEEN MADE BY THE QUALIFYING COMPANY, YOU MUST SUBMIT THE ORIGINAL CERTIFICATE OF DEDUCTION (FORM FWT45) AS ISSUED BY THE QUALIFYING COMPANY IN SUPPORT OF YOUR CLAIM.

Part 3: BANK ACCOUNT DETAILS TO WHICH REPAYMENT WILL BE MADE

Bank Account Name:									
IBAN/Bank Account N	umber:								
BIC/SWIFT:									
Clearing Code:									
Clearing Code Type:									

Part 4: DECLARATION AND SIGNATURE

I declare that all the particulars contained on this form are correct to the best of my knowledge and belief. I further declare that a credit has not been received in my country of residence for the Irish Film Withholding Tax which is the subject of this expenses claim.

Signature of Claimant:	
Capacity in which signed:	
Date:	DD I MM I YYYY

The Revenue Commissioners collect taxes and duties and implement customs controls. Revenue requires customers to provide certain personal data for these purposes and certain other statutory functions as assigned by the Oireachtas. Your personal data may be exchanged with other Government Departments and agencies in certain circumstances where this is provided for by law. Full details of Revenue's data protection policy setting out how we will use your personal data as well as information regarding your rights as a data subject are available on our **Privacy** page on **www.revenue.ie**. Details of this policy are also available in hard copy upon request.

The information in this document is provided as a guide only and is not professional advice, including legal advice. It should not be assumed that the guidance is comprehensive or that it provides a definitive answer in every case.

FWT Exp.