



1 Applicant (beneficial owner)

1.1 Applicant's official name		1.2 Accounting period for which income was received, start date (ddmmyyyy)		1.3 Accounting period for which income was received, end date (ddmmyyyy)	
1.4 Postal address		1.5 Postal code		1.6 Post office	
1.7 Telephone number		1.8 e-mail		1.9 Country of residence	
				1.10 Country code	
1.11 Tax identification number (TIN)		1.12 Other registration number		1.13 Finnish Business ID	
1.14 The applicant is					
<input type="checkbox"/> 1 Corporate entity		<input type="checkbox"/> 2 State, Municipality or other Public entity		<input type="checkbox"/> 3 Association or Charity	
<input type="checkbox"/> 4 Pension Institution or Fund		<input type="checkbox"/> 5 UCITS Collective investment scheme (fund)		<input type="checkbox"/> 6 Non-UCITS fund	
<input type="checkbox"/> 7 Trust		<input type="checkbox"/> 8 Estate		<input type="checkbox"/> 9 Other	
<input type="checkbox"/> 10 Consortium i.e. a separate taxpayer					
1.15 Please describe the applicant's legal entity form (see the instructions)					
1.16 The applicant is			1.17 ISIN code		
<input type="checkbox"/> a stock-exchange listed company			<input type="checkbox"/> a non-listed company		
1.18 Umbrella funds					
The applicant is					
<input type="checkbox"/> a main fund		<input type="checkbox"/> a sub-fund		<input type="checkbox"/> List of sub-funds is enclosed	
Name of main fund				Tax identification number	
1.19 Has the applicant previously requested refund from the Tax Administration?			1.20 Has the applicant requested refund from the income payer during the year of payment?		
<input type="checkbox"/> Yes <input type="checkbox"/> No			<input type="checkbox"/> Yes <input type="checkbox"/> No		
1.21 Has the applicant previously requested refund on this income from the Tax Administration?			1.22 Is the applicant treated as having a permanent establishment in Finland?		
<input type="checkbox"/> Yes <input type="checkbox"/> No			<input type="checkbox"/> Yes <input type="checkbox"/> No		
1.23 Refund of the tax withheld at source is sought on the basis of:					
<input type="checkbox"/> tax treaty between Finland and applicant's country of residence		<input type="checkbox"/> EU law		<input type="checkbox"/> other reason	
1.24 Decision number of a previous refund decision (if any)					

2 Information on the agent or representative signing this application form

2.1 Representative's name		2.2 Representative's Business ID	
2.3 Address			
2.4 Postal code		2.5 Post office	
2.6 Country			
2.7 Telephone number		2.8 e-mail	



3 Bank account number for the refund

3.1 IBAN account number (or other int'l format)		3.2 BIC or SWIFT	3.3 Name of account holder	
3.4 Name of bank				
3.5 Address of bank		3.6 Postal code	3.7 Post office	
3.8 Country	3.9 Customer reference no for facilitating the payment		3.10 Clearing code	

4 Information on the income

4 This application concerns the tax withheld at source on:

dividends interest payments royalties

5 Dividends (If more than one payments of dividends were made, complete Form 6167e.)

5.1 Receipt of dividends is					
<input type="checkbox"/> due on nominee-registered shares		<input type="checkbox"/> due on the applicant's direct shareholding		<input type="checkbox"/> through a fund	
				<input type="checkbox"/> through a partnership	
5.2 Official name of fund or partnership			5.3 Country of tax residence of fund or partn.		5.4 Country code
5.5 TIN of fund or partnership (if available)			5.6 Business ID of fund or partnership (if available)		
5.7 Name of payer					
5.8 Payer's ISIN			5.9 Payer is stock-exchange listed		5.10 Date of payment (ddmmyyyy)
			<input type="checkbox"/> Yes <input type="checkbox"/> No		
5.11 Number of shares	5.12 Gross amount of dividend		5.13 Amount of tax withheld		5.14 Amount requested as refund
	€	c	€	c	€ c
5.15 Gross amount of dividend in total		5.16 Amount of tax withheld in total		5.17 Amount requested as refund in total	
€	c	€	c	€	c
5.18 Give the name of the foreign intermediary bank(s) handling the dividend payment					
5.19 Because more than one payments of dividends were made, we seek refund for more than one payment. <input type="checkbox"/> We completed Form 6167e.					



6 Interest payments or Royalties

6.1 Name of payer					
6.2 Date of payment (ddmmyyy)	6.3 Amount of the income		6.4 Amount of tax withheld		6.5 Amount requested as refund
	€	c	€	snt	€ c

7 Stock lending and borrowing, and the beneficial owner

7.1 Is the applicant the beneficial owner of the income? <input type="checkbox"/> Yes <input type="checkbox"/> No	7.2 Were the shares part of a lending agreement? <input type="checkbox"/> Yes <input type="checkbox"/> No
7.3 Were the shares part of some other legal or contractual obligation? <input type="checkbox"/> Yes <input type="checkbox"/> No	7.4 Does the applicant have rights to the shares on which dividends were paid to the applicant's account? <input type="checkbox"/> Yes <input type="checkbox"/> No

Date	Signature and printed name
Contact details for more information	

Certificate of residence or other registration certificate issued by officials in the applicant's home country is enclosed.

A power of attorney granted to the applicant's representative is enclosed.