



# Request by Non-Resident for a Refund of South African Tax for Pension and Annuities in terms of a Double Taxation Agreement

**RST02**

### Information:

Form to be completed by a resident of a foreign country who claims a refund from South African (SA) tax in respect of pension and annuities in terms of a Double Taxation Agreement. For a directive please complete the RST01 form.  
This form, when completed, should be taken to your local tax office for certification in your country of tax residence. Once certified post the original form to the South African Revenue Service (SARS): Private Bag x923, Pretoria, 0001 or attach it to your Notice of Objection (NOO) For each source of Pension/Annuity, complete the relevant schedule.

## Applicant Details – Individual

Country of Tax Residence  
National Identification Number in Country of Tax Residence

Surname

First Name

Other Name

Initials

Date of Birth (CCYYMMDD)

SA ID No.

Tick here if you do not have a SA ID number:

Country of Birth

## Taxpayer Reference Number(s)

South African Taxpayer Reference No.

Foreign Taxpayer Identification Number in country of Tax Residence

## Contact Details

Fixed Line Telephone No.

Mobile No.

Email

## Physical Address

Unit No.

Complex (if applicable)

Street No.

Street / Farm Name

Suburb / District

City / Town

Country code

Postal Code

## Declaration by Applicant

I declare that the information furnished in this return is true and correct in every respect.

Date (CCYYMMDD)

Signature

## Postal Address

Mark here with an "X" if same as your physical address or complete your Postal Address

Is your Postal Address a Street Address?

Y  N

Mark here with an "X" if this is a "care of" address

Postal Agency or Other Sub-unit (if applicable) (e.g. Postnet Suite ID)

PO Box

Private Bag

Other PO Special Service (specify)

Number

Post Office

Country Code

Postal Code

Unit No.

Complex (if applicable)

Street No.

Street / Farm Name

Suburb / District

City / Town

Country code

Postal Code

## Certificate by Country of Tax Residence

To be completed by the relevant Tax Office in your country of tax residence.

Name of applicant

Tax reference number

Year from which you were a tax resident (CCYY):

Name of Country

Tax official: Surname

Tax Official: Designation

Tax Official: Initials

## Declaration (by the Relevant Tax Office in the Country of Tax Residence)

I hereby certify that the applicant is a resident and is liable to taxes in this country under the reference number stated above (if applicable)

Date (CCYYMMDD)

Signature

Official Stamp

## Refund Information

### Refund Information #

**Period for which a refund is sought:**

Date From:  
(CCYYMMDD)

Date To:  
(CCYYMMDD)

Amount of Income before  
South African tax R

,

Amount of South African  
tax withheld R

,

Was the amount subject to tax in the country of residence?

Y  N

If the amount was taxed in the country of residence attach proof thereof. If not, provide reasons below:

## Schedule for Pension and/or Annuities

### Type of Income

Indicate the type of Income:

Pension

Number of Refunds

Annuity

Number of Refunds





## Bank Account Details

Please be advised that all of the following information is required, in English, in order to transfer a client's funds abroad. Please attach the following:

Stamped copy of bank statement (1<sup>st</sup> page only) – must reflect the account details.

Proof of residential address

Copy of client's ID/Passport

Account No.

Branch No./  
Sorting Code

Swift/BIC Code

Bank Name

Branch Name

Name of Account Holder/  
Beneficiary

Account Type:

Cheque

Savings

Transmission

Required Currency

IBAN Number for UK and  
European countries

## Physical Address of Bank

Unit No.

Complex (if  
applicable)

Street No.

Street / Farm  
Name

Suburb /  
District

City / Town

Country code

Postal Code