STATUTORY INSTRUMENTS

2008 No. 1945

INSURANCE PREMIUM TAX

The Insurance Premium Tax (Amendment) Regulations 2008

Made - - - - 22nd July 2008

Laid before the House of Commons 22nd July 2008

Coming into force - - 1st September 2008

The Commissioners for Her Majesty's Revenue and Customs make the following Regulations in exercise of the powers conferred by sections 53(6), 65(1) and 74(8) of the Finance Act 1994(a):

Citation and commencement

1. These Regulations may be cited as the Insurance Premium Tax (Amendment) Regulations 2008 and come into force on 1st September 2008.

Amendment of the Insurance Premium Tax Regulations 1994

2. The Insurance Premium Tax Regulations 1994(**b**) are amended as follows.

Omission of regulations 29, 30 and 31

- **3.** Omit—
 - (a) regulation 29 (tax representatives: notification in certain cases),
 - (b) regulation 30 (tax representatives: registration), and
 - (c) regulation 31 (tax representatives: liability to notify).

Amendment of regulation 33

- 4. For regulation 33 (liability of insured persons: scope) substitute—
 - "33. This Part applies where an insurer who is a registrable person—
 - (a) does not have any business establishment or other fixed establishment in the United Kingdom, and
 - (b) is established in a country or territory in respect of which it appears to the Commissioners that the condition in section 65(1A) of the Act is met.".

⁽a) 1994 c.9; section 73(1) defines "the Commissioners" as meaning the Commissioners of Customs and Excise. The functions of the Commissioners of Customs and Excise were transferred to the Commissioners for Her Majesty's Revenue and Customs by section 5(2) of the Commissioners for Revenue and Customs Act 2005 (c.11). Section 50(1) of that Act provides that a reference to the Commissioners of Customs and Excise shall be taken as a reference to the Commissioners for Her Majesty's Revenue and Customs. Section 65(1) was amended by section 143 of the Finance Act 2008 (c.9) which also inserted subsections (1A) and (1B).

⁽b) S.I. 1994/1774; relevant amending instrument is S.I. 1997/1157.

Amendment to Schedule

5. In the Schedule, for the form numbered 1 (Insurance Premium Tax, Application for Registration), substitute the form numbered 1 in the Schedule to these Regulations.

Dave Hartnett
Steve Lamey

22nd July 2008

SCHEDULE

FORM 1

REGULATION 5



Insurance Premium Tax

Application for Registration

When you have filled in this form and signed it, please send it to:

The Controller
Central Collection Unit (IPT)
HM Revenue & Customs
Alexander House
21 Victoria Avenue
Southend-On-Sea X
SS99 1AA

For official use

Date of receipt

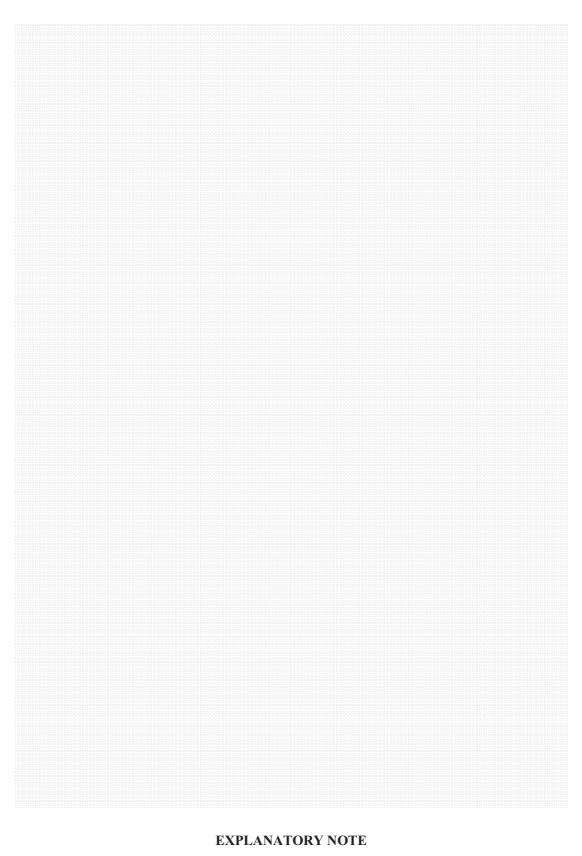
IPT 1 HMRC 07/08

Insurance Premium Tax

	Application f	or Registrat	ion			
	you start, please read the Registration sections of the pital letters.	he notice 'Insurar	nce Premium Tax	x'. Write clearly in ink and		
	Please give your full name and your business address.	Name Business address	Postcode			
		Phone		Fax		
	Please give your trading name if it is different from the name given at question 1.					
ablis	omplete question 3 if you do not have a business hment in the United Kingdom (UK). Otherwise, uestion 4 .					
(a)	Do you wish to appoint an agent to act on your	Please tick 🔍	N 10 10 10 10 10 10 10 10 10 10 10 10 10			
	behalf in the UK?	Yes	☐ Go	o to 3 (b).		
		No	☐ Gc	o to 4 .		
(b)	If you wish to appoint an agent in the UK to act on your behalf, please complete this authority and provide the agent's details. This authority allows us to exchange and disclose information about you with your agent and to deal with them on matters within the responsibility of HM Revenue & Customs (HMRC), as specified on this form. We will hold this authority until you tell us that the details have changed.	I, (print your name) of (name of your business, company or partnership if appropriate authorise HMRC to disclose information to (agent's business name) who is acting on my/our behalf. This authorisation is limite to IPT matters only. Signature Date				
	Give your agent's details here	Address				
		Dhave		Postcode		
		Phone Client reference		Fax		
	What is the legal status of your business? If you are a partnership, please remember to complete	Please tick ☑				
	form IPT 2 as well as this form.	Sole proprietor				
		Limited Company Give details from your certificate of incorporation:				
			Certificate nu	ımber Date of certificate		
		Unincorporated Body Specify type of body (other than partnership)				
		1				

5	Do you wish to use this form to notify that you are going to use the special accounting scheme from the first of your accounting periods? (Use of the scheme is mandatory for a Lloyd's syndicate wishing to elect Lloyd's to act on its behalf.)	Please tick Yes		No		
nly coi raight	mplete 6 if you are a Lloyd's syndicate. Otherwise go to 7 .					
6 (a)	Please give your syndicate number.					
(b)	Are you electing that Lloyd's may act for you from the first of your accounting periods?	Please tick Yes	// //	No	П	
(c)	Are all your premiums processed through Lloyd's Policy Signing Office (LPSO)?	Please tick Yes		Go to 6		
(d)	What percentage (%) of your premium income is not processed through LPSO?	No	%	Go to 6	90).	
(e)	Who will be responsible for submitting IPT returns?	Please tick Lloyd's Managing a	☑			
ഗ	Please give your managing agent's name and address.	Name Address				
Ŋ		Name Address			Postcode Fax	
	and address.	Name			Postcode Fax	
		Name Address		No		
(g)	and address.	Name Address Phone Please tick	✓	No		
(g)	and address. Are you involved in Mirror Syndicate activity?	Name Address Phone Please tick Yes Please tick		No	Fax Give the number of the syr which has taken over your	
(g)	and address. Are you involved in Mirror Syndicate activity?	Name Address Phone Please tick Yes Please tick Yes		No No	Fax Give the number of the syr which has taken over your	

(a)	Are you applying to register because a business has been transferred to you as a going concern?	Please tick Yes □		Give details belo	
		Date of transfer		IPT registration owner	no. or previous
		No 🗆		Go to 10.	
				G0 t0 T0.	
(b)	Do you wish to keep the IPT number of the	Please tick 🕡			
	previous owner? If you wish to keep the number, please remember to	Yes			
	complete form IPT 68.	No 🗆			
	Please give the date you expect to receive your				
	first taxable premium.				
	The term premium includes any fee, charged by an intermediary, which is subject to IPT.				
	What class(es) of insurance business do you intend				
	to provide? See Section 5 of the notice 'Insurance Premium Tax'				
	which will help you to answer this question.				
	Please continue on a separate sheet of paper if				
	necessary, and attach it to this form.				
	Please give the expected value of your taxable				
	premium income for the 12 month period	E			
	commencing from the date that you have given in question 10.				
	If you do not have completely accurate figures,				
	please give an estimate instead.				
	Are you registered for VAT in the UK?	Please tick			
		Yes 🗆		Give your VAT re	egistration no.
		No 🗆			
ı	Please indicate your preferred method of payment.	I			
	If you wish to pay by direct debit, please complete the	Please tick			
	accompanying mandate form. Mandate forms can be	Direct debit		Credit transfer	L
	obtained from the Central Collection Unit.	Cheque		Postal order	
		Cash			
	Please complete and sign the declaration.				
Dec	claration				
1,					
	ter your full name in capital letters) declare that the info	rmation given on this	form and o	contained in any	accompanying
	cument is true and complete.				
	ase tick 🔲 Signature 📗				
50l	e proprietor 🗌 Partner 🔲 Director 🔲 Comp Secre		sea 🗀	Other L Please give deta	ils below
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(This note is not part of the Regulations)

These Regulations which come into force on 1st September 2008 amend the Insurance Premium Tax Regulations 1994 (S.I. 1994/1774). They make amendments which are consequential upon

changes made to the Finance Act 1994 (c.9) by sections 142 and 143 of the Finance Act 2008 (c.9).

Regulation 3 gives effect to the deletion of sections 57 and 58 of the Finance Act 1994 (tax representatives).

Regulation 4 amends regulation 33 (scope of liability of insured persons) in accordance with the amendments made to section 65 of the Finance Act 1994 to mirror the wording of the amended provision.

Regulation 5 amends the Schedule to the regulations by substituting a new Form 1: Application for Registration.

A full impact assessment has not been produced for this instrument as no impact on the private or voluntary sectors is foreseen.