



THE BUSINESS
INFORMATION SYSTEM



For official use									

START-UP NOTIFICATION

General partnership, limited partnership and
tax consortium

Y2

This form is for having your enterprise entered in the Trade Register, VAT Register, Prepayment Register, Employer Register and the Register of payers of tax on insurance premiums.

Please, send the completed form to: PRH - Verohallinto, Yritystietojärjestelmä, PL 2000, 00231 HELSINKI

Name of business	
Company Name (treated as a suggested name until the Trade Register has approved it)	Language
	<input type="checkbox"/> Finnish <input type="checkbox"/> Swedish
Alternative Company Name 2	Alternative Company Name 3

Requesting registration in (complete pp. 5-6 to give details to the Tax Administration)
<input type="checkbox"/> The Trade Register (enclose receipt proving you paid the fee)
<input type="checkbox"/> Note: If a consortium is formed merely for tax purposes, it is not entered in the Trade Register.

Trade register: Accelerated processing request (does not apply to changes of addresses and contact details).
We normally process the completed application forms on a first come, first served basis. Exceptions can only be made for a valid reason. Requests for accelerated processing cannot always be granted.
<input type="checkbox"/> Tick this box if you are asking for registration by a desired date. Note: enclose a separate letter to give your reasons for this.

Domicile	
Municipality	Country of residence (if not Finland)

Other company names (fill in if needed)	
Parallel names (translations of the company name into foreign languages)	
Auxiliary Name	Description of activities under this Auxiliary Name
Auxiliary Name	Description of activities under this Auxiliary Name

Address information for public use at PRH and the Finnish Tax Administration (postal or street address is mandatory)						
c/o (postal address)			c/o (street address)			
Postal address (street or road)	Building no	Entrance no	Apartment no	PO Box no	Postal code	Town or City
Street address (street or road)	Building no	Entrance no	Apartment no	Postal code	Town or City	
e-mail	Telephone		Website			

The accounting period begins on the day the company is established, or the day when business in Finland is started (foreign companies).			
Date of establishment or start date of business in Finland	dd.mm.yyyy	End date of the first accounting period (max. 18 months)	dd.mm.yyyy

The next accounting period (length = one year) starts automatically after the first.

YTJ 10021



Y2

<input type="checkbox"/> The company is to continue the trade or business of the previous company (e.g. a private trader becomes a limited partnership), see instructions. Complete the Personal Data Form.	
Name of the previous company	Business ID

Main sector (line of business) to be declared to Tax Administration (five-digit TOL 2008 code. For more information, visit website of Statistics Finland.)					

Type of enterprise		
<input type="checkbox"/> General partnership	<input type="checkbox"/> Limited partnership	<input type="checkbox"/> Other (for example tax consortium)
Enclosure for the Tax Administration		
<input type="checkbox"/> 6204 Registration of a foreign enterprise		

Day of signing the partnership agreement (The original agreement must be enclosed.) In the case of a consortium formed for purposes of taxation, enclose copy of transfer of title, deed of purchase, deed of gift.	dd.mm.yyyy

Who can provide further information about this notification; an individual, an accounting firm etc.?		
Name		
Postal address	Postal code	Town or City
Telephone	e-mail	

Additional information

Date and signature		
Date	Signature and printed name	Telephone

Privacy statement: For the information referred to by Art. 13 and 14 of the EU General Data Protection Regulation on the registrations made on the basis of this form, visit ytfi.fi or contact the Finnish Patent and Registration Office or the Tax Administration.

YTJ 10022



Y2

Partners or shareholders of a tax consortium (Complete the Personal Data Form.)					
Name of partner		Date of birth (dd.mm.yyyy)	Business ID	Citizenship (if not Finnish)	
<input type="checkbox"/> General	Partner since (date)	Share of assets		Share of income	
	dd.mm.yyyy	fractional	percentage	fractional	percentage
<input type="checkbox"/> Silent					
Silent partner's capital investment in total		€		Silent partner's interest rate	

Name of partner		Date of birth (dd.mm.yyyy)	Business ID	Citizenship (if not Finnish)	
<input type="checkbox"/> General	Partner since (date)	Share of assets		Share of income	
	dd.mm.yyyy	fractional	percentage	fractional	percentage
<input type="checkbox"/> Silent					
Silent partner's capital investment in total		€		Silent partner's interest rate	

Name of partner		Date of birth (dd.mm.yyyy)	Business ID	Citizenship (if not Finnish)	
<input type="checkbox"/> General	Partner since (date)	Share of assets		Share of income	
	dd.mm.yyyy	fractional	percentage	fractional	percentage
<input type="checkbox"/> Silent					
Silent partner's capital investment in total		€		Silent partner's interest rate	

Name of partner		Date of birth (dd.mm.yyyy)	Business ID	Citizenship (if not Finnish)	
<input type="checkbox"/> General	Partner since (date)	Share of assets		Share of income	
	dd.mm.yyyy	fractional	percentage	fractional	percentage
<input type="checkbox"/> Silent					
Silent partner's capital investment in total		€		Silent partner's interest rate	

Name of partner		Date of birth (dd.mm.yyyy)	Business ID	Citizenship (if not Finnish)	
<input type="checkbox"/> General	Partner since (date)	Share of assets		Share of income	
	dd.mm.yyyy	fractional	percentage	fractional	percentage
<input type="checkbox"/> Silent					
Silent partner's capital investment in total		€		Silent partner's interest rate	

If necessary, a blank page can be copied.

YTJ 10023



Y2

INFORMATION FOR THE TRADE REGISTER

Partner's right to represent the company

The general partner is entitled to sign for the company independently.

Representation and signing rights are as indicated in section _____ of the partnership agreement.

Managing director (Complete the Personal Data Form.)

Name	Date of birth (dd.mm.yyyy)	Citizenship (if not Finnish)

Procurator holder (Complete the Personal Data Form.) Date of birth (dd.mm.yyyy)

Name	
Right to represent (individually or together with whom)	Citizenship (if not Finnish)

YTJ 10024

Procurator holder (Complete the Personal Data Form.) Date of birth (dd.mm.yyyy)

Name	
Right to represent (individually or together with whom)	Citizenship (if not Finnish)

Other details to be registered



Company

Company name		Confirm your language selection - English	
		<input type="checkbox"/> Yes	
Foreign registration number or company ID	Foreign VAT number	Foreign Tax Identification Number (TIN)	

Postal address to be given to the Tax Administration use only (not publicly displayed at www.ytj.fi)

Postal address (street or road)			Building no	Entrance no	Apartment no
PO Box no	Postal code	Town or City	Country		

Bank account number

IBAN	BIC

Registration for VAT (value added tax)

Company is required to register for VAT (see instructions, p. 10 to 11)	as of (dd.mm.yyyy)
<input type="checkbox"/> For a business operation (e.g. fixed establishment for VAT purposes) <input type="checkbox"/> Only to submit information regarding intra-Community supplies and acquisitions (See instructions, p. 10 to 11) <input type="checkbox"/> For distance sales of goods to consumers in Finland, threshold exceeded on the start date (§ 63 a, VAT Act)	

Applying for a VAT liability

Company applies for VAT liability on a voluntary basis (see instructions, p. 12 to 13)	as of (dd.mm.yyyy)
<input type="checkbox"/> Apply voluntarily for VAT liability for sales to VAT registered buyers in Finland (under § 12.2, VAT Act) <input type="checkbox"/> Letting of immovable property (under § 12 and § 30, VAT Act. Rental contract must be enclosed). <input type="checkbox"/> For distance sales of goods to consumers in Finland, staying below the threshold (§ 63 a, VAT Act)	

Prepayment registration

Requesting entry in the Prepayment Register (§ 25, Prepayment Act) (Earliest possible date of registration is the date of arrival of the completed form.)	as of (dd.mm.yyyy)

Payroll

Registrering as an employer paying wages on a regular basis	as of (dd.mm.yyyy)

Insurance premiums

Registrering as liable to pay tax on insurance premiums	as of (dd.mm.yyyy)

Tax period of self assessed taxes

If turnover (=net sales) does not exceed €100,000 per year, you have the option to report and pay VAT, payroll withholding, employer's social security and source tax in quarter-year periods. If it does not exceed €30,000, VAT can be filed and paid by calendar year, and other self-assessed taxes quarterly. Please note that 'turnover' also includes the company's foreign selling.

<input type="checkbox"/> Sales for calendar year is €30,000 max.	<input type="checkbox"/> Sales for calendar year is from €30,001 to €100,000
<input type="checkbox"/> Sales for calendar year is higher than €100,000	
Desired length of tax period – VAT	Desired length of tax period – employer contributions
<input type="checkbox"/> year	<input type="checkbox"/> quarterly
<input type="checkbox"/> quarterly	<input type="checkbox"/> monthly
<input type="checkbox"/> monthly	

The Tax Administration will decide on the length of the period and inform you in writing.



Description of business conducted in Finland

What kind of operations does the company have in Finland?

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Fill in this section if the company has building or installation operations in Finland

Name of customer	Business ID	Object	Duration (dd.mm.yyyy–dd.mm.yyyy)

If the company performs building, installation or assembly work, is the duration of a project, or several consecutive projects, longer than 9 months Yes No

Does your company have

An office or workshop <input type="checkbox"/> Yes <input type="checkbox"/> No	Sales office in Finland <input type="checkbox"/> Yes <input type="checkbox"/> No	A warehouse <input type="checkbox"/> Yes <input type="checkbox"/> No	Other outfit <input type="checkbox"/> Yes, what <input type="checkbox"/> No
Number of employees in Finland <input type="checkbox"/> 0 <input type="checkbox"/> 1 <input type="checkbox"/> 2–5 <input type="checkbox"/> over 5		Do your employees stay longer than 6 months in Finland? <input type="checkbox"/> Yes <input type="checkbox"/> No	

Please describe the duties (such as sales or marketing management) of the company employees in Finland

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Does your company have a physical person/legal person in Finland with authority to process commercial orders or to sign contracts
 Yes No

Do any company directors live in Finland permanently <input type="checkbox"/> Yes <input type="checkbox"/> No	Where are significant decisions concerning the company made? <input type="checkbox"/> Country of domicile <input type="checkbox"/> In Finland <input type="checkbox"/> Elsewhere
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To whom does your company sell goods in Finland?

<input type="checkbox"/> Consumers	<input type="checkbox"/> Companies registered for VAT in Finland	<input type="checkbox"/> Others
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To whom does your company sell services in Finland?

<input type="checkbox"/> Consumers	<input type="checkbox"/> Companies registered for VAT in Finland	<input type="checkbox"/> Others
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What activities does your company have? (For more information, please see instructions.)

Intra-Community sales from Finland <input type="checkbox"/> Yes <input type="checkbox"/> No	Intra-Community purchases to Finland <input type="checkbox"/> Yes <input type="checkbox"/> No	Export transactions from Finland <input type="checkbox"/> Yes <input type="checkbox"/> No
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Estimated investment volume during the first accounting period in Finland €

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Additional information

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Mandatory enclosures

<input type="checkbox"/> Trade Register extract from country of domicile	<input type="checkbox"/> Translation of the trade register extract (into English, Finnish or Swedish)
<input type="checkbox"/> Photocopy of construction contract	<input type="checkbox"/> Photocopy of employee leasing contract

Other enclosures added as necessary

<input type="checkbox"/> Power of attorney
<input type="checkbox"/> Photocopy of rental contract (§ 12 and §30, VAT Act)

Date and signature

Date	Signature and printed name (enclose a Power of Attorney as necessary)