

**T. 21-PART 2****INCOME TAX INSTALMENT PAYMENTS
Employee's Leaving Certificate**

EMPLOYEE'S TAX REF. NO.										NATIONAL INSURANCE NO.									
SURNAME MR MRS MISS MS										FORENAMES									
ADDRESS																			
FORENAMES OF SPOUSE										PREVIOUS NAME (if changed since 6th April)									
DATE OF CESSATION / /										CODE IN USE AT CESSATION DATE									
										Non-Resident? (SEE NOTE 4)				<input type="checkbox"/> YES		<input type="checkbox"/> NO			

Instructions to Employee

- KEEP THESE FORMS AND HAND THEM TO YOUR NEW EMPLOYER**
- If you do not intend to take further employment e.g. retirement, commencing self-employment, family reasons. etc., send both parts to the Income Tax Division with a letter of explanation.
- This is an important document **KEEP IT SAFE**.

Instructions to new Employer:

- Complete PART 3 immediately the employee commences and send it to the Income Tax Division.
- Retain PART 2 as your authority to operate the code shown above to calculate the income tax payable on the new employees remuneration.
- This form must be retained for three years.
- If answer is yes, please ensure taxable pay is calculated at the **HIGHER RATE**.

