##### PRILOGA 4

 ***ANNEX 4***

ZAHTEVEK ZA OPROSTITEV DAVKA OD DOHODKA, KI GA ŠTUDENTI DOSEGAJO V REPUBLIKI SLOVENIJI, NA PODLAGI DOLOČB MEDNARODNE POGODBE O IZOGIBANJU DVOJNEGA OBDAVČEVANJA DOHODKA / *REQUEST FOR EXEMPTION OF TAX ON INCOME, WHICH STUDENTS EARN IN THE REPUBLIC OF SLOVENIA, BASED ON PROVISIONS OF THE TREATY ON AVOIDANCE OF DOUBLE TAXATION OF INCOME*

**1.** Mednarodna pogodba o izogibanju dvojnega obdavčevanja dohodka med Republiko Slovenijo in \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_, \_\_\_\_\_\_\_odstavek \_\_\_\_\_\_ člen / *Treaty on avoidance of double taxation of income between the Republic of Slovenia and \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_, Paragraph \_\_\_\_\_\_ Article \_\_\_\_\_\_\_.*

**2. PODATKI O PREJEMNIKU DOHODKA / *DETAILS OF THE RECIPIENT OF INCOME***

|  |  |  |
| --- | --- | --- |
| Ime in priimek / *Name and surname* |  | Dan, mesec in leto rojstva: / *Day, month and year of birth:* |
| Fizična oseba / *Individual* | Podatki o prebivališču / *Domicile or residence* | Telefon: / *Telephone:*  |
| Državljanstvo / *Citizenship* |  |
| Država rezidentstva prejemnika / *Recipient’s country of residence* |  |
| Podatki o prebivališču v Republiki Sloveniji / *Domicile or residence in the Republic of Slovenia* |  | Davčna številka v Republiki Sloveniji: / *Tax identification number in the Republic of Slovenia:* |

**3. PODATKI O IZPLAČEVALCU DOHODKA (pooblaščena organizacija ali Zavod za zaposlovanje) /**

***DETAILS OF THE PAYER OF INCOME (authorised organisation or Employment Office)***

|  |  |
| --- | --- |
| Firma in pravno-organizacijska oblika / *Registered name and legal/ organisational form* |  |
| Sedež / *Registered office* | Telefon: / *Telephone:* |
| Davčna številka / *Tax identification number* |  |

**4. PODATKI O NAVZOČNOSTI PREJEMNIKA V REPUBLIKI SLOVENIJI / *DETAILS OF RECIPIENT'S PRESENCE IN THE REPUBLIC OF SLOVENIA***

|  |  |
| --- | --- |
| Datum prvega prihoda v Republiko Slovenijo / *Date of the first arrival in the Republic of Slovenia* |  |
| Predvideni čas prebivanja v Republiki Sloveniji / *Planned time of residence in the Republic of Slovenia* |  |

**5. PODATKI O DOHODKU, PREJETEM OD IZPLAČEVALCA, ZA KATEREGA SE UPORABI POGODBA IZ 1. TOČKE / *DETAILS OF THE INCOME, RECEIVED FROM THE PAYER, TO WHICH THE TREATY MENTIONED IN ITEM 1 IS APPLICABLE***

|  |  |  |
| --- | --- | --- |
| Znesek dohodka / *Amount of income* | Datum plačila / *Due date of payment* | Skupni znesek dohodka,doseženega v tekočem letu / *Total amount of income achieved in the current year* |
|  |  |  |

**6. DRUGO / *OTHER***

|  |
| --- |
|  |

**7. Izjavljam / *I hereby declare:***

1. prejemnik dohodka je tudi upravičeni lastnik dohodka / *the* *recipient of income is also the beneficial owner of income;*
2. prejemnik dohodka je upravičen do koristi, določene v mednarodni pogodbi iz 1. točke / *the* *recipient of income is eligible for benefits, provided in the treaty mentioned in Item 1;*
3. da so podatki resnični, točni in popolni / *that the data are truthful, accurate and complete*.

V/Na/*In/At*………......……….., dne/*Date*………….......……. ..........................................……………… (podpis zavezanca/-ke oziroma pooblaščenca/-ke)

 *(Signature of the taxpayer or authorised person)*

8. POTRDILO PRISTOJNEGA ORGANA DRŽAVE REZIDENTSTVA PREJEMNIKA DOHODKA / *CERTIFICATION OF THE COMPETENT AUTHORITIES OF THE INCOME RECIPIENT’S COUNTRY OF RESIDENCE*

Potrjujemo, da je oseba, navedena v 2. točki, rezident \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ v smislu \_\_\_\_odstavka \_\_\_\_\_člena mednarodne pogodbe o izogibanju dvojnega obdavčevanja dohodka med Republiko Slovenijo in \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_. / *We hereby certify that the person stated in Item 2 is a resident of\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ within the meaning of Paragraph \_\_\_\_ Article \_\_\_\_\_ of the treaty on avoidance of double taxation of income between the Republic of Slovenia and \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_.*

V/Na/*In/At* \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_, dne/*Date* \_\_\_\_\_\_\_\_\_\_\_ Žig/*Stamp* Podpis/*Signature* \_\_\_\_\_\_\_\_\_\_\_\_\_\_

9. PODATKI O POOBLAŠČENCU / *DETAILS OF THE AUTHORISED PERSON*

|  |  |
| --- | --- |
| Ime in priimek / *Name and surname* |  |
| Naslov / *Address* | Telefon: / *Telephone:* |

Priloge: / *Attachments:*

**(Izpolni davčni organ /** *to be completed by the tax authorities)*

 Pooblastilo / *Authorisation*

 Dokazilo o statusu / *Proof of status*

Na zahtevo davčnega organa je treba predložiti

tudi druga dokazila o upravičenosti do ugodnosti po

mednarodni pogodbi. / *Upon request of the tax*

*authorities also other proofs of eligibility for benefits*

*according to the treaty shall be submitted.*