###### PRILOGA 8

######  *ANNEX 8*

**ZAHTEVEK ZA OPROSTITEV DAVKA OD DRUGIH DOHODKOV NA PODLAGI DOLOČB MEDNARODNE POGODBE O IZOGIBANJU DVOJNEGA OBDAVČEVANJA DOHODKA /**

*REQUEST FOR EXEMPTION OF TAX ON OTHER INCOMES 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 / firma / *Name and surname / Registered name* |  |
| Fizična oseba / *Individual* | Podatki o prebivališču / *Domicile or residence* | Telefon:*Telephone:* |
| Državljanstvo / *Citizenship* |  |
| Gospodarska družba ali druga oseba /  *Company or other entity* | Sedež / *Registered office* | Telefon:*Telephone:* |
| Kraj dejanskega upravljanja/ *Place of effective management* | Telefon:*Telephone:* |
| Država rezidenstva prejemnika / *Recipient’s country of residence* |  | Davčna številka:*Tax identification number:* |
| Poslovna enota v Republiki Sloveniji / *Permanent establishment in the Republic of Slovenia* Da / *Yes* Ne / *No*(če da – izpolni / *if yes - fill in)* | Naziv / *Name* |  |
| Sedež / kraj */* *Registered office / location* | Telefon:*Telephone:* |
| Opis dejavnosti */ Description of business activities* |  |

**3. PODATKI O IZPLAČEVALCU DOHODKA / *DETAILS OF THE PAYER OF INCOME***

|  |  |
| --- | --- |
| Ime in priimek ali firma in pravno-organizacijska oblika / *Name and surname or registered name and legal/organisational* form |  |
| Naslov oziroma sedež / *Address or registered office* | Telefon: *Telephone:* |
| Država / *Country* |  |
| Davčna številka / *Tax identification number* |  |
| Poslovna enota v Republiki Sloveniji / *Permanent establishment in the Republic of Slovenia* Da / *Yes*  Ne / *No* (če da – izpolni / *if Yes - fill in)* | Naziv / *Name* | Opis dejavnosti: *Description of business activities*:  |
| Sedež / kraj / *Registered office / location* | Telefon:*Telephone:* |
| Davčna številka / *Tax identification number* |  |

**4. 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***

|  |  |  |
| --- | --- | --- |
| Vrsta dohodka / *Type of income* | Datum plačila / *Due date of payment* | Znesek dohodka /*Amount of income* |
|  |  |  |

**5. DRUGO / *OTHER***

|  |
| --- |
|  |

**6. 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)*

7. 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 /*Stam*p Podpis/*Signature*\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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

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

Priloge: / *Attachments:*

 Pooblastilo / *Authorisation*

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

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 on avoidance of double taxation shall be submitted.*

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