

This form is available at **www.skatteverket.se**This form is intended for persons who are not residents of Sweden and who, for example,

- are staying in Sweden for a period shorter than six months or on board a Swedish merchant vessel
- receive a pension from Sweden
- have a daily commute to Sweden for work

If the Swedish personal identity number/co-ordination number is missing, a copy of passport or national ID-card proving your identity, must be enclosed.

Application

Special income tax for non-resident	ial income tax for non-res	ident
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Date	Year paid out			

Application relates to income from	m				
Employment in Pension private sector	Seafarer	Em pub	ployment in lic sector	Othe	r
			oirth or Swedi	sh personal i	dentity number/
Applicant		Year	Month	Day	Number
Surname					
Previous surnames					
Tevious surnames				Male	e Femal
Il first/given names				Telephon	e number, daytime
ddress in Sweden					
Profession					
ax identification number/TIN-number - in your count	try of residence				
E-mail address					
Sirthplace and country	Citizens	ship			
		p			
Marria Overden	from			until	
Stay in Sweden	from			until	
revious stay in Sweden during the last 12-mor					
moved from/left Sweden	on this	date			
Permanent address in the country of residence					
Country of residence					
ncome payer					
ncome payer's name				Corporate	Identity Number
Address					
E-mail address				Telephone	e number
Do you have a foreign employer but per	rform vour work in Swe	den for a S	wedish clie	nt (hired la	abor)?
Please, state the Swedish company					Identity Number
				1	
lave/Will you be staying in Sweden more than 183 day	ys during a period of 12 mont	hs? Is you e	mployer/paye	r's company	established in Swed

Date of birth or Swedish coordination number			personal id	entity number/	
Yea	r	Month	Day	Number	

			rear	WOTHT	Day	Number
Employment income						
Period of employment/assignment Do you receive compensation for travel to and from Sweden and accomodation in Sweden? Please answer YES or NO.						
from	until	Yes		No		
Kind of work or assignment If you receive reimbursement of expenses (for example car remuneration or per diem) in addition to salary for work or assignment, you must state the type of reimbursement under Additional information , below.						
Commuters	Yes	Border cro	ossers	Yes, o		certificate of
Where is work/task condu	ctod?					
Only in Sweden (name of the Swedish municipality(-ies)) Name of the Swedish municipality(Sweden and abroad (name of the Swedish municip the country(-ies))	ality(-ies) an	d name of	Only (name	abroad of the coun	try(-ies))
Name of the country(-ies)	, 					
Thame of the country(-les)						
Pension						
Type of pension (Note that	you need to fill a separate for	m for each	n payer)			
Public pension	Private pension scheme	Pens	ion saving	s account		
Occupational pension due	e to employment in public sector	Occu	pational pe	ension due	to employr	ment in private
Other:						
Seafarer income						
Vessel's name						
Other income from Sv Amount, SEK	veden	The payme	nt relates to			
rundani, den		The payme	The rolation to			
Additional information that you www.skatteverket.se	income tax instead of Special inco would like to be taxed under the li					se, add under
Additional information	1					
Applicants signature						
Signature		Name in blo	ock capitals			
Contact person, if any						
Name and address	,					
E-mail address					Telephone	number

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