

FORM E3C

Commissioner of Stamp Duties
55 Newton Road, Revenue House
Singapore 307987

**REQUISITION FORM FOR
LEASE & TENANCY**



INLAND REVENUE
AUTHORITY
OF SINGAPORE

Nature of Transaction: Assignment of Lease

This form may take you 10 minutes to fill in.

Please get ready the following information to fill in the form: -

- a) the document that you are paying Stamp Duty on;
- b) particulars of the parties involved and any other details related to the document.

Please complete this Form in BLOCK letters.

Fields that are marked with * are mandatory.

FOR OFFICIAL USE	Document Ref No.	
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Getting Started	
Applicant's Name*	
Applicant's Email Address*	
Applicant's Contact No.*	+65
File Ref No. (optional)	
Nature of Transaction	Assignment of Lease
Document Description/ Title	Assignment of Lease

Document Details			
Format of Document* (Select "Physical" or "Electronic")	<input type="checkbox"/> Physical	<input type="checkbox"/> Electronic (Select one of the Mode of Offer and Acceptance if it is "Electronic")	
		Mode of Offer* (Select one)	
		<input type="checkbox"/> Email	<input type="checkbox"/> Messaging Service (e.g. SMS, WhatsApp)
		<input type="checkbox"/> Website/ Portal	<input type="checkbox"/> Physical
		<input type="checkbox"/> Verbal	
		<input type="checkbox"/> Others (If Others, please specify)*	
		Mode of Acceptance* (Select one)	
		<input type="checkbox"/> Email	<input type="checkbox"/> Messaging Service (e.g. SMS, WhatsApp)
		<input type="checkbox"/> Website/ Portal	<input type="checkbox"/> Physical
		<input type="checkbox"/> Others (If Others, please specify)*	
Document signed in* (Select "Singapore" or "Overseas")		<input type="checkbox"/> Singapore	<input type="checkbox"/> Overseas
Date of Document* (DD/MM/YYYY)		Received Date of Document in Singapore (DD/MM/YYYY)* (Mandatory if "Document signed in" is "Overseas")	
<input type="checkbox"/> Date of Document is unavailable (Date of Document and/ or Received Date of Document in Singapore is not required on tick of field)			

Assignor Details#			
Profile*	<input type="checkbox"/> Singapore Citizen	NRIC	
	<input type="checkbox"/> Singapore PR	NRIC	
	<input type="checkbox"/> Foreigner	Identity Type	<input type="checkbox"/> FIN <input type="checkbox"/> PASSPORT <input type="checkbox"/> OTHERS
	Identity No.*		
	<input type="checkbox"/> Entity	Identity Type	<input type="checkbox"/> UEN-LOCAL CO <input type="checkbox"/> UEN-BUSINESS <input type="checkbox"/> UEN-OTHERS <input type="checkbox"/> OTHERS
	Identity No.*		
Name*			
Email Address*			
Mobile/ Contact No.*	+65		
	(Note: Enter Mobile No. if Profile selected is Singapore Citizen, Singapore PR or Foreigner)		

For entity/ individual with a foreign identification number, please enter the following details.			
Gender* (Not applicable if Profile is Entity)	<input type="checkbox"/> Male <input type="checkbox"/> Female	Date of Birth* (DD/MM/YYYY) (Not applicable if Profile is Entity)	
Mailing Address* (Select "Singapore" or "Other")			
<input type="checkbox"/> Singapore	Postal Code*		Blk/ House No.* (Enter if postal code consists of multiple blocks)
	Level-Unit	# -	
<input type="checkbox"/> Other (for Foreign or PO Box Address)	Country*		
	Address Line 1*		
	Address Line 2*		
	Address Line 3		
	Address Line 4		

Assignor Details#			
Profile*	<input type="checkbox"/> Singapore Citizen	NRIC	
	<input type="checkbox"/> Singapore PR	NRIC	
	<input type="checkbox"/> Foreigner	Identity Type	<input type="checkbox"/> FIN <input type="checkbox"/> PASSPORT <input type="checkbox"/> OTHERS
	Identity No.*		
	<input type="checkbox"/> Entity	Identity Type	<input type="checkbox"/> UEN-LOCAL CO <input type="checkbox"/> UEN-BUSINESS <input type="checkbox"/> UEN-OTHERS <input type="checkbox"/> OTHERS
	Identity No.*		
Name*			
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<input type="checkbox"/> Singapore	Postal Code*		Blk/ House No.* (Enter if postal code consists of multiple blocks)
	Level-Unit	# -	
<input type="checkbox"/> Other (for Foreign or PO Box Address)	Country*		
	Address Line 1*		
	Address Line 2*		
	Address Line 3		
	Address Line 4		

Assignee Details#					
Profile*	<input type="checkbox"/> Singapore Citizen	NRIC			
	<input type="checkbox"/> Singapore PR	NRIC			
	Country of Nationality*				
	<input type="checkbox"/> Foreigner	Identity Type	<input type="checkbox"/> FIN	<input type="checkbox"/> PASSPORT	<input type="checkbox"/> OTHERS
	Identity No.*				
	Country of Nationality*				
	<input type="checkbox"/> Entity	Identity Type	<input type="checkbox"/> UEN-LOCAL CO	<input type="checkbox"/> UEN-BUSINESS	<input type="checkbox"/> UEN-OTHERS
Identity No.*					
Name*					
Email Address*					
Mobile/ Contact No.*	+65				
(Note: For Singapore Citizen, Singapore PR and Foreigner to fill in Mobile No.)					

For entity/ individual with a foreign identification number, please enter the following details.				
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Mailing Address* (Select "Singapore" or "Other")				
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	Level-Unit	#	-	
<input type="checkbox"/> Other (for Foreign or PO Box Address)	Country*			
	Address Line 1*			
	Address Line 2*			
	Address Line 3			
	Address Line 4			

Assignee Details#			
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	Country of Nationality*		
	<input type="checkbox"/> Foreigner	Identity Type	<input type="checkbox"/> FIN <input type="checkbox"/> PASSPORT <input type="checkbox"/> OTHERS
	Identity No.*		
	Country of Nationality*		
	<input type="checkbox"/> Entity	Identity Type	<input type="checkbox"/> UEN-LOCAL CO <input type="checkbox"/> UEN-BUSINESS <input type="checkbox"/> UEN-OTHERS <input type="checkbox"/> OTHERS
Identity No.*			
Name*			
Email Address*			
Mobile/ Contact No.*	+65		
	(Note: For Singapore Citizen, Singapore PR and Foreigner to fill in Mobile No.)		

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<input type="checkbox"/> Singapore	Postal Code*		Blk/ House No.* (Enter if postal code consists of multiple blocks)
	Level-Unit	# -	
<input type="checkbox"/> Other (for Foreign or PO Box Address)	Country*		
	Address Line 1*		
	Address Line 2*		
	Address Line 3		
	Address Line 4		

Property/ Land Details			
Property Details#			
Postal Code*		Blk/ House No.* (Enter if postal code consists of multiple blocks)	
Level-Unit	# -		
Property Type* (Select one)	<input type="checkbox"/> Private Residential (Landed or Condo)		<input type="checkbox"/> Commercial
	<input type="checkbox"/> Executive Condominium		<input type="checkbox"/> Industrial
	<input type="checkbox"/> HDB Residential		<input type="checkbox"/> Others
	<input type="checkbox"/> Mixed (with Residential Use)		

Land Details# (Fill in land details ONLY if the transaction involves land)			
MK/ TS*	<input type="checkbox"/> MK	<input type="checkbox"/> TS	MK/ TS No.*
Street Name			
Lot No.*		Plot/ Parcel No.	
Master Plan Zoning* (Select one)	<input type="checkbox"/> Residential		<input type="checkbox"/> White
	<input type="checkbox"/> Residential with Commercial at 1st Storey		<input type="checkbox"/> Residential/ Institution
	<input type="checkbox"/> Commercial and Residential		<input type="checkbox"/> Non-Residential

Consideration Details	
Enter the amount of consideration involved for this transaction	
Residential (\$\$)*	
Non-Residential (\$\$)*	
Total Consideration (\$\$)* (Only for documents dated before 20 Feb 2018)	

Remission/ Relief/ Exemption
<p>Status of Eligibility</p> <p>Select the type for which the document is eligible. Otherwise, continue to the next step.</p> <hr/> <p>Type* (Select one)</p> <p><input type="checkbox"/> None is selected</p> <hr/> <p><input type="checkbox"/> Stamp Duties (Donations to Institution of a Public Character) (Remission)</p> <p>This is to confirm that</p> <ol style="list-style-type: none"> This instrument effected the donation of the asset to any institution of a public character. Ad valorem duty was paid/ remitted/ exempted on the acquisition by the donor of the asset. <p>Please provide the Document Ref No. for the stamping of the acquisition by the donor of the asset, if any.</p> <p>Document Ref No. _____</p>

Declaration

Please review the entered information before submitting. Errors in your submission will affect the stamp duty assessment and subsequent amendment may take up to 30 days for review.

I declare that

- The information given in this transaction, is true and complete.
- This instrument qualifies for the relevant remission applied for (if applicable).
- I understand that penalties may be imposed for the submission of an incorrect instrument and / or provision of false information to the Commissioner of Stamp Duties, which may include a fine and / or imprisonment term, where applicable.

Signature

Name of Signatory

Date