

FORM E4A

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

**REQUISITION FORM FOR
SHARE TRANSFER**



INLAND REVENUE
AUTHORITY
OF SINGAPORE

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)	
Document Description/ Title* (Select one)	<input type="checkbox"/> Sale and Purchase Agreement <input type="checkbox"/> Share Transfer <input type="checkbox"/> Declaration of Trust
Intent of Purchase/ Transfer	<input type="checkbox"/> To hold the shares in trust for the beneficial owner (Not applicable if Document Description/ Title is "Declaration of Trust")

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)	
Total Consideration Amount (S\$) (Not applicable if Document Description/ Title is "Declaration of Trust")	

Relationship between Trustee and Beneficiary* (Applicable if Document Description/ Title is "Declaration of Trust")	
<input type="checkbox"/> Company and Nominee	<input type="checkbox"/> Family/ Relatives (excluding Parent-Child, Spouse and Sibling)
<input type="checkbox"/> Parent and Child	<input type="checkbox"/> Sibling
<input type="checkbox"/> Spouse	<input type="checkbox"/> Trustee/ Member of Association/ Society/ Organisation
<input type="checkbox"/> Others (If Others, please specify)*	
Reasons* (Applicable if Document Description/ Title is "Declaration of Trust") You may select more than one.	
<input type="checkbox"/> Beneficiary is a minor	<input type="checkbox"/> Beneficiary is not a legal entity
<input type="checkbox"/> Estate planning	<input type="checkbox"/> Pursuant to nominee arrangement
<input type="checkbox"/> Others (If Others, please specify)*	

Transferor Details#, OR Trustee Details (If Document Description/ Title is "Declaration of Trust")			
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		

Transferee Details#,**OR****Transferee (Trustee) Details** (To fill in only if "To hold the shares in trust for the beneficial owner" is selected for Intent of Purchase/ Transfer)

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		

Beneficiary Details#

To fill in if:

- Document Description/ Title is “Declaration of Trust”, or
- “To hold the shares in trust for the beneficial owner” is selected for Intent of Purchase/ Transfer

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		

Target Company Details	
Identity Type*	<input type="checkbox"/> UEN-LOCAL CO <input type="checkbox"/> UEN-OTHERS <input type="checkbox"/> VCC SUB-FUND NO. <input type="checkbox"/> OTHERS
Identity No.*	
Company Name*	
Date of Incorporation*	
Company Type*	<input type="checkbox"/> Private company without property in Singapore (Complete Option 1A or 1B where applicable)
	<input type="checkbox"/> Private company with property in Singapore (Complete Option 1B and Working Sheet D)
	<input type="checkbox"/> Listed company on SGX (Complete Option 2)
	<input type="checkbox"/> Variable Capital Company (VCC)/ VCC Sub-Fund without property in Singapore (Complete Option 1A or 1B where applicable)
	<input type="checkbox"/> Variable Capital Company (VCC)/ VCC Sub-Fund with property in Singapore (Complete Option 1B and Working Sheet D)

OPTION 1A: For Company Type “Private company, or Variable Capital Company (VCC)/ VCC Sub-Fund without property in Singapore” (No. of months between Date of Document and Date of Incorporation is less than or equal to 18)	
Transfer Details	
A. Subscription Price per Share (S\$)*	
B. No. of Shares Transferred*	
Total Subscription Price (A X B) (S\$)*	

OPTION 1B: For Company Type “Private company, or Variable Capital Company (VCC)/ VCC Sub-Fund with or without property in Singapore			
Financial Details for the Target Company			
Date of Accounts* (DD/MM/YYYY)		A. Assets: Immovable Property (Sum of book/ market value(s) in Property/ Land Details, if available)	
B. Other Assets (S\$)		C. Total Liabilities (S\$)	

Transfer Details			
- Indicate the shares structure of the Target Company* (Select one)			
<input type="checkbox"/> The company has only 1 class of shares			
Class of Shares	Ordinary		
Total No. of Issued Shares*		No. of Shares Transferred*	

<input type="checkbox"/> The company has multiple classes of shares (e.g. Ordinary, Preference, etc.)						
Class of Shares*#	Ordinary					
Priority over Capital Distribution*						
Total Paid Up Capital/ Premium Contributed (S\$)*						
Total No. of Issued Shares*						
No. of Shares Transferred*						
Entitlement to Surplus (%)*						

OPTION 2: For Company Type “Listed company on SGX”	
Transfer Details	
A. Market Price per Share (S\$)*	
B. No. of Shares Transferred*	
Total Market Price (A X B) (S\$)*	

Remission/ Relief/ Exemption

Refer to Annex A for the list.

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

Remission/ Relief/ Exemption**Status of Eligibility**

Select the type for which the document is eligible.
Otherwise, continue to the next step.

Type* (Select one)

None is selected

Stamp Duties (Matrimonial Proceedings) (Remission)

This is to confirm that

1. This instrument is being made and the asset is being acquired as a result of compliance with a matrimonial proceeding for the division of the matrimonial assets.
2. **The asset is conveyed or transferred to:** (Select one)
 - The other party to the matrimonial proceedings.
 - Any child or children of the marriage or former marriage of the parties to those proceedings.
 - Both the other party and any such child or children.

Stamp Duties (Donations to Institution of a Public Character) (Remission)

This is to confirm that

1. This instrument effected the donation of the asset to any institution of a public character.
2. Ad valorem duty was paid/ remitted/ exempted on the acquisition by the donor of the asset.

Please provide the Document Ref No. for the stamping of the acquisition by the donor of the asset, if any.

Document Ref No. _____