

# Approved Research Provider Application form

Use this form to enrol for Approved Research Provider status.

1. IRD Number	<input type="text"/>			
	(8 digit numbers start in the second box. ( 1 2 3 4 5 6 7 8 ) )			
2. Name	<input type="text"/>			
3. Trade Name <i>(if applicable)</i>	<input type="text"/>			
4. Street address	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
	Number & Street	Suburb	City	Postcode
5. Postal address <i>(If different to Street address)</i>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
	Number & Street/Post Box number	Suburb	City	Postcode
6. Contact telephone number(s).	<input type="text"/>	<input type="text"/>	<input type="text"/>	
	Day	Mobile	After hours	
7. Email	<input type="text"/>			
8. Business website <i>(if applicable)</i>	<input type="text"/>			
9. Authorised person	<input type="text"/>	<input type="text"/>		
	Name	Role/position		
	<input type="text"/>	<input type="text"/>		
	Contact phone number	email		

**Please tick as applicable**

	YES	NO
1. The applicant is capable of performing research and development activities that are eligible for research & development tax credits.	<input type="radio"/>	<input type="radio"/>
2. The applicant will be available to carry out eligible research and development activities on behalf of other persons.	<input type="radio"/>	<input type="radio"/>
3. The applicant is available to perform research and development activities on behalf of other persons not associated with them.	<input type="radio"/>	<input type="radio"/>
4. The applicant undertakes or will undertake research and development activities on behalf of other persons at market value rates.	<input type="radio"/>	<input type="radio"/>
5. In carrying out eligible research and development activities on behalf of others the applicant will maintain appropriate and sufficient records to support the activities and the income and expenditure incurred.	<input type="radio"/>	<input type="radio"/>
6. The applicant has facilities in New Zealand needed to perform research and development activities	<input type="radio"/>	<input type="radio"/>
a. Address of primary research & development location <i>(if applicable)</i>		

7. State the applicant's main area of research expertise (e.g. software, agriculture): \*

*Where you have expertise across several areas, eg if you are a University, state your preference here and any additional areas on page 2.*

a. Provide the relevant 4-digit ANZSRC code (s)

ANZSRC codes can be found here:

<https://www.ird.govt.nz/research-and-development/tax-incentive/claiming/general-approval>

Main code	Sub code
<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>

The applicant certifies that the details as displayed are true and correct.

The applicant undertakes to meet the on-going eligibility requirements. If the applicant no longer meets the requirements the applicant agrees to advise Inland Revenue as soon as practicably possible.

Signature of the authorised person  Date:

*(Please note that once you receive approval your name, website, **main** area of research expertise and email (if provided) will be published on the Inland Revenue website.)*

Area of expertise

ANZSRC code *(cont'd)*

Main code

Sub code


Main code	Sub code

If your R&D speciality doesn't fit into existing research expertise groups or ANZSRC code definitions tell us about what you are doing here.

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