

EMPLOYER DETAILS	5			
Employer Number				
Employer Name				

EMPLOYEE DETAILS	Address			
Employee Name	House No.			
Employee Name	Street			
I.D. Card	Locality			
Telephone Number	Postcode			

CATEGORY1-CARS

Car Model	Year of Registration	Registration No.	CAR VALUE Invoice incl. VAT Regist Fee Price List		Extra Accessories Value €	Rented/ Leased	Owned	(If Leased) Annual Rental Payment	Amount Re-Paid by Beneficiary (if any)	CIR Approval No. in case of Reduced Rate (If any)	Annual Taxable Benefit Value €	Operational Date of Fringe Benefit	Termination Date of Fringe Benefit

CATEGORY 2 - ASSETS & ACCOMODATION

Type of Asset	Full Details of Asset	Original Cost of Asset €	Market Value as at 1st Jan €	Leased, Hired or Owned	(If Leased) Annual Rental Payment	(If Leased or Hired) Details of Third Party From whom leased or hired	Amount re-paid by Beneficiary€	Annual Taxable Benefit Value €	Operational Date of Fringe Benefit	Termination Date of Fringe Benefit

CATEGORY 3 - OTHER FRINGE BENEFITS

Other Type of Benefit	Full Details of Benefit (A Separate line for every type of benefit)	Full Value of Benefit €			Taxable Benefit Value €	Operational Date of Fringe Benefit	Termination Date of Fringe Benefit

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