# SAINT CHRISTOPHER AND NEVIS INLAND REVENUE DEPARTMENT

## **CRS/FATCA FINANCIAL INSTITUTION (FI) DEREGISTRATION**

## AE0I-200

#### All fields are mandatory.

This form is to be used by a Principal Point of Contact (PPoC) or Authorized Representative to advise the Competent Authority (CA) that an FI no longer has a FATCA and CRS reporting obligation and to submit a request for an FI to be deregistered from the Saint Christopher (St. Kitts) and Nevis AEOI Portal. Each request will be reviewed and either approved or denied. Requests are only approved where sufficient evidence is provided and there are no outstanding reporting obligations.

1. Indicate the FI to be deregistered from the AEOI portal. If additional lines are needed, you may attach another sheet:

COMPANY REGISTRATION NO.:	
CORPORATION NAME:	

## 2. Indicate the reason for the FI deregistration:

	LIQUIDATION	TRANSFER BY CONTINUATION
[	STRIKE-OFF	TERMINATION OF TRUST
	CLASSIFICATION CHANGE (State new Classification below)	OTHER: (State details below)
CLASSIFICATION CHANGE:		
OTHER DETAILS:		

# **3.** Contact information:

Provide details of where the FI will retain its books, documents, or other records, which relate to the information required to be reported to the Competent Authority under the applicable Legislations. Such documents must be retained for a period of six years following the deregistration.

CONTACT NAME:			
E-MAIL:			
ADDRESS:			
CITY /TOWN:			
STATE /REGION /PROVINCE			
COUNTRY:		POSTAL CODE:	
PHONE:	FA	<b>X</b> :	

#### 4. Evidence for deregistration:

List below and enclose document(s) showing the reason for the deregistration (e.g., certificate of dissolution).

#### 5. Declaration:

By submitting this FI Deregistration Form to the CA, the PPoC confirms that:

- 1. The FI has submitted all FATCA and CRS Filings and corrections required by the applicable legislations and the AEOI Portal Guide.
- 2. The FI has appointed the contact named above to maintain its records and accounts with such legislations.
- 3. The FI has instructed the PPoC to submit the FI Deregistration request.
- 4. The information contained therein is accurate.

PPoC:	
PPoC SIGNATURE:	
DATE:	