

SAINT CHRISTOPHER AND NEVIS INLAND REVENUE DEPARTMENT

S-10

STAMP DUTY (S-10): REVENUE RECEIPT VOUCHER



Note: Please read the instructions. Where applicable, complete the names, addresses, nationality and property information. Failure to complete applicable sections can cause a delay in the processing of your document(s). If there are multiple vendors or purchasers, please complete the Stamp Duty Supplemental form (S-10/S) to provide the additional information.

TYPE OF DOCUMENT: _____

LAW FIRM /INSTITUTION: _____

RELATING TO: LAND LAND AND BUILDING CONDOMINIUM OTHER

OTHER DETAIL: _____

SECTION 1 - VENDOR / FROM

LAST NAME: _____ **FIRST NAME:** _____

MIDDLE NAME(S): _____

DATE OF BIRTH: _____ DD / MMM / YYYY

COMPANY NAME: _____ **REG. NO.:** _____

HOME STREET ADDRESS: _____

CITY / TOWN / VILLAGE: _____ **STATE:** _____

COUNTRY: _____ **CODE:** _____

HOME PHONE: _____ **MOBILE PHONE:** _____ **WORK PHONE:** _____

MAILING STREET ADDRESS: _____

CITY / TOWN / VILLAGE: _____ **STATE:** _____

COUNTRY: _____ **CODE:** _____

E-MAIL ADDRESS: _____

NATIONAL OF: _____ **SOCIAL SECURITY NO. (SKN):** _____

TYPE OF IDENTIFICATION: _____ **EXPIRES:** _____ **ID NO.:** _____

TYPE OF IDENTIFICATION: _____ **EXPIRES:** _____ **ID NO.:** _____

SECTION 2 - PURCHASER / TO

LAST NAME: _____ **FIRST NAME:** _____

MIDDLE NAME(S): _____

DATE OF BIRTH: _____ DD / MMM / YYYY

COMPANY NAME: _____ **REGISTRATION NO.:** _____

HOME ADDRESS: _____

CITY / TOWN / VILLAGE: _____ **STATE:** _____

COUNTRY: _____ **MAIL CODE:** _____

HOME PHONE: _____ **MOBILE PHONE:** _____ **WORK PHONE:** _____

MAILING ADDRESS: _____

CITY / TOWN / VILLAGE: _____ **STATE:** _____

COUNTRY: _____ **MAIL CODE:** _____

E-MAIL ADDRESS: _____

NATIONALITY: _____ **SOCIAL SECURITY NO. (SKN):** _____

TYPE OF IDENTIFICATION: _____ **EXPIRES:** _____ **ID NO.:** _____

TYPE OF IDENTIFICATION: _____ **EXPIRES:** _____ **ID NO.:** _____

SECTION 3 - REAL PROPERTY IDENTIFICATION

LOT NO.: _____ **LAND SIZE (AREA):** _____

REGISTER/ VOL.: _____ **FOLIO:** _____

PROPERTY ADDRESS: _____

CITY / TOWN / VILLAGE: _____

ISLAND: ST . CHRISTOPHER NEVIS

