

දේශීය ආදායම් දෙපාර්තමේන්තුව உள்நாட்டு இறைவரித் திணைக்களம் INLAND REVENUE DEPARTMENT

ලේකම් අංශය 14 වන මහල දේශීය ආදායම් ගොඩනැගිල්ල ශීමත් චිත්තම්පලම් ඒ ගාඩිනර් මාවත තැපෙ. 515, කොළඹ 2- ශී ලංකාව

செயலகம் 14 வது மாடி உள்நாட்டு இறைவரிக் கட்டிடம் சேர் சிற்றம்பலம் ஏ காடினர் மாவத்தை த.பெ.இல. 515, கொழும்பு - 2, இலங்கை Secretariat
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Circular No: SEC/2022/E/01

June 27, 2022

Circular to Taxpayers

Extension of Time for Payment of Income Tax

This Circular sets out the procedure to any person who wishes to apply for the extension of time for payment of income tax under Section 151 Inland Revenue Act, No. 24 of 2017 (IRA).

1. Tax Liabilities Covered

In accordance with Section 151 (1) of the IRA, taxpayers may apply to extend the time of payments specified in Section 145 of the IRA. Therefore, applications to extend the time of payments could be submitted for any tax or penalty assessed or deemed to be assessed as default, advance, amended or additional assessment, and due and payable as provided in section 145 of the IRA.

2. Procedure to Apply for the Time Extension

- I. Duly fill the Specified Form of Application (Attachment 1)
- II. Attach following documents to the Application
 - Reasons to Request for the Time Extension. If time extension is requested based on an appeal pending resolution, copy of the appeal should also be attached with other reasons.
 - If the person wishes to make the due payment as instalment-wise, Instalment plan of the person (Date of Payment, Amount, Manner of Payment)
 - If the person wishes to provide other arrangements to ensure the payment, relevant documents should be attached. However, the Tax Officials may request the same, even though the person has not attached any other arrangement to ensure the payment [Sec.151 (2)].
 - Include Contact details (Mobile Nos., Office Fixed Lines, E-mail Addresses) of two
 employees /relatives or authorized representatives for the purpose of obtaining further
 documentary evidences or interviews, if necessary
 - Details of previously granted time extensions but the total taxes not paid as at the date of application (Relevant Tax Payment, Year of Assessment, Amount Outstanding as at the date of Application)

III. Submit the application with attachments to the Central Documentation Unit/Regional Offices of the Inland Revenue Department and copy to the Default Collection Unit/Branch of the relevant tax file.

Jenny.

D. R. S. Hapuarachchi Commissioner General of Inland Revenue (Acting)

D.E.S. Hapuarachchi
Commissioner General of Inland Revenue (Acting)
Inland Revenue Department
Sir Chittampalam A. Gardiner Mawatha
Colombo 02.

For office use only

Serial number	Unit /RO	Officer	
	8		

APPLICATION FOR EXTENSION OF THE TIME FOR PAYMENT

1.	Name of the T	axpayer:			
2.	TIN:				
3.					
4.	Type of the Ta	xpayer : Indivi	dual / Partnership	o/ Company (inc	orporated in or outside
Sri I	anka) / Public Co	rporation/ Trus	t / Unit Trust or M	Mutual Fund/ Ch	aritable Institution/
Non-	-Governmental Or	ganization/ Em	ployees Trust Fu	nd / Employees	Provident Fund /
Pens	ion Fund/ Employ	ees Terminatio	n Fund/ Employe	ees Gratuity Fund	d/ Other Fund /Other
(Plea	ase specify)	HUL ZEGEDINEQ	19H90 DA	a afosimomy vin	
5.	Whether Resid	dent or Non R	esident for the r	elevant Year of	Assessment:
6.	Details of the	tax payment fo	or which time ex	tension is sough	Full Name of the Decia
	Year of Assessment	Tax (Rs.)	Penalty (Rs.)	Due date for payment	Charge/Assessment No. (if any)
					aningjest
	ntibus successi	ri Fisqiyaari y	Directory Sects (8)	Worker Singer	ov, tone a rasele viole.
7.	Time of Exten	sion Requeste	d:		
			• • • • • • • • • • • • • • • • • • • •		
		•••••	• • • • • • • • • • • • • • • • • • • •		

8. Details of previous time extension requests

1	2.	3	4	5	6
Date of Request	Year of Assessment	Whether extension granted/ not granted	Whether the extension is granted by permitting to pay the tax as instalments? (Yes/No)	If "Yes" for Column 4, outstanding installments and instalments paid (Number and Amount in Rs.)	Whether other arrangements made for extension? (Yes/No) – Please specify
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					9011
					The state of the s
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	374000000000000000000000000000000000000	23×9×21×2×2×3	****************	**************************************	
	no to ni ba	ετοτροσεί	urship/ Company	o Taxpayer: Individual / Part	4 Type of t

(If the provided space is not enough, Use a separate sheet)

9. Declaration

I declare to the best of my knowledge and belief that all particulars furnished in this form are accurate and complete. I am aware that making an incorrect or false statement or giving false information is an offence.

Full Name of the Declarant:			
or Carren Assessment (So. (if any)	cualty (Ms.) Ducdate Dayment	Hetans of the tax payment for wh Yest of lax (Ms.) Pr Assessment	
Designation:			
(Individual/Partner/Managir Agent)	ng Director/Director/Sec	cretary/Principal Officer/Duly Authorize	ed
Telephone Number: Office		Mobile:	
E-mail:		······································	
Signature:		Official Frank	

NIC Number/ Passport Number:

Specified form to apply for an extension of the time for payment in terms of Section 151 (1) of the Inland Revenue Act, No.24 of 2017.