

NORWAY TAX REFUND PACK INSTRUCTIONS

Thank you for choosing "AmberTax" for Norway Tax Refund service. "AmberTax" offers professional assistance and fast services. Our team will make all efforts to get you the highest possible refunds in compliance with Norway Tax law!

Please simply follow 5 STEPS to start your Tax Refund process:

1 STEP: PRINT the pack and complete it

2 STEP: SIGN and put the date at places marked with "X"

3 STEP: ADD necessary documents:

- Copy of passport

- Copy of Skattekort

- Copy of form Selvangivelse

 Copy(-ies) of RF-1015B form(s) and/or final pay slip(s) from each of your employer(s)

4 STEP: SEND it by e-mail <u>info@ambertax.com</u> OR by post:

AmberTax PO Box 311, Kaunas LT-44005, Lithuania

5 STEP: WAIT until Tax Refund money will be paid out to you!

NOTES

SERVICE FEES:

- Pay nothing upfront
- FEE for Tax Refund service is stated in the contract
- Replacement fee for each missing RF-1015B form is 20 EUR

TAX REFUND PROCESS TIME:

You can expect your Tax Refund approximately after 6-8 month from the date when your declaration is filled and sent out to Norway. Tax Refund process for 2017 tax year will be started at January, 2018.

NEED HELP?

Call +370 37 206041 OR write info@ambertax.com

www.ambertax.com





DATE (mm/dd/yyyy): ____m/___d/20____

NORWAY TAX REFUND APPLICATION FORM

PERSONAL DETAILS (Please complete in CAP letters) First, middle and last name: Current address: Phone number: Email address: Marital status If you are married, please provide your husband/wife Name, Surname, Date of Single Divorced ○ Married ○ Widowed If you have children, please provide all (Name, Surname, Date of Birth) How did you find out about AmberTax? (website/press/friend/other) OTHER DETAILS Your FODELSNUMMER: Tax year for which you request us to process Tax Return: Have you already tried to get tax refund for that year? ○ No Yes (by myself) Yes (in another agency) Arrival in Norway date ____m/___d/20____ Leaving Norway date ____m/___d/20___ Have you worked in Norway before? (If "Yes", please mark year, and provide Have you been outside Norway during the period mentioned above? (If "Yes", please provide periods) periods) ○ No Yes O 2016 __ O 2015 _____ **2014** Have you applied for tax refund before? (If "Yes", please provide period) Last home address in Norway? Did you receive your tax return (Selvangivelse) from the tax office? ○ No ○ Yes (If "YES", attach the copy of all pages) Did you receive your tax settlement notice (Skaateopgjor) from the tax office? O No O Yes (If "YES", attach the copy of all pages) No Yes (If "YES", enter the amount here) ___ Did you receive a tax refund from the tax office? **EMPLOYMENT DETAILS** (Please indicate ALL YOUR EMPLOYERS IN NORWAY) Number of employers: If you had more than 2 employers, please provide information on separate page! Worked from: Worked till: Name and address of your employer and position: Enclosed is: _/__/20_ O RF-1015B _/__/20_ (mm/dd/yyyy) (mm/dd/yyyy) Cast payslip O None of them Worked from: Worked till: Name and address of your employer and position: Enclosed is: _/__/20 O RF-1015B __/__/20_ (mm/dd/yyyy) (mm/dd/yyyy) ○ Last payslip None of them I hereby agree that AmberTax Ltd. may collect and process personal data for the purpose of my tax affairs. I confirm that all provided information is correct.

SIGNATURE:

Simpleta LTD., doing business as AmberTax, company identification number 136041128, represented by director Rimas Petkevicius, acting under company regulations, hereinafter referred to as AMBERTAX, and

personal identification number hereinafter referred to as the **CLIENT**, are hereby concluding this contract:

1. Subject of the Contract:

- 1.1. The purpose of this Contract is to provide paid consultations and tax return services for the CLIENT, who worked in Norway (hereinafter referred to as the TAX REFUND).
- 2. Rights and obligations of the Contracting Parties:
- 2.1. CLIENT'S rights and obligations:
- 2.1.1. CLIENT agrees to provide all documents that are mentioned in "Norway Tax Refund Application Form" and sign all the documents that are necessary for obtaining TAX REFUND, including Power of Attorney for tax, banking and financial matters.
- 2.1.2. CLIENT ensures that all information provided to AMBERTAX is correct and full to the best of his/her knowledge. By signing this contract CLIENT grants AMBERTAX the right to use personal data about CLIENT, but only and as much as needed in accordance to this contract.
- 2.1.3. CLIENT agrees to provide additional information and/or documents necessary for TAX REFUND upon AMBERTAX request.
- 2.1.4. CLIENT will not apply directly (or using third party services) with Tax Authorities of country mentioned in paragraph 1.1. of this contract for TAX REFUND of the tax years mentioned in Norway Tax Refund Application.
- 2.1.5. CLIENT agrees to have AMBERTAX as exclusive provider of his/her TAX REFUND services for tax years mentioned in the Norway Tax Refund Application Form.
- 2.1.6. CLIENT grants AMBERTAX the right to receive the whole amount entered on the TAX REFUND check issued in CLIENT'S name, also to present all TAX REFUND checks issued in CLIENT'S name to the bank and endorse (negotiate) them, or/and to receive TAX REFUNDS to AMBERTAX bank account.
- 2.1.7. CLIENT agrees to pay TAX REFUND consulting fee, which is 12% of the amount refunded, but not less than 70 EUR for return of personal income taxes for each tax year. Additional fees may apply:
 - for replacement of missing form RF-1015B 20 EUR
 - for all follow-ups with Tax Authorities in regards to CLIENT'S TAX REFUND 35 EUR. Follow-up includes, but is not limited to requests for additional documents, CLIENT'S identity verification, phone calls, tax return adjustment, examination and/or audit.
 - for additional service requested by CLIENT, where fee has been previously agreed between AMBERTAX and CLIENT.
- 2.18. CLIENT ensures that personal bank information and address to which he/she requests to receive TAX REFUND is correct. AMBERTAX is not obligated to search for CLIENT if he/she hasn't provided AMBERTAX with information necessary to pay out TAX REFUND or if the provided information is not correct.
- 2.19. CLIENT has the right to withdraw from this contract within 7 days from the date when CLIENT has signed this contract. Such notice of withdrawal must be made in written form by post, fax or e-mail. If the CLIENT withdraws from this contract, AMBERTAX has a right for reimbursement of expenses incurred, when pursuing CLIENT'S orders before the termination of the contract.
- 2.1.10. CLIENT commits to update AMBERTAX of any change in his/her contact details and personal bank account in 5 days from the date such changes occurs. If CLIENT starts employment/self-employment in any foreign country, he/she must inform AMBERTAX about such employment immediately.
- 2.2. AMBERTAX rights and obligations:
- 2.2.1. AMBERTAX agrees to process CLIENT'S tax returns to Tax Authorities of country mentioned in paragraph 1.1 of this contract in a timely manner and in compliance with the tax law of that country.
- 2.2.2. AMBERTAX agrees to use all personal information and documents provided by CLIENT only for preparation, signing and filling of tax returns, to receive and endorse (negotiate) all TAX REFUND checks issued in CLIENT'S name or/and to receive TAX REFUNDS to it's own bank account.
- 2.2.3. AMBERTAX assumes obligation not to disclose any personal and tax return information in any manner to any third parties without CLIENT'S written consent, except, cases when law requires disclosure of such information. AMBERTAX has the right to transfer TAX REFUND process to third party or to delegate the third party to act on the behalf of CLIENT if it is necessary for TAX REFUND.
- 2.2.4. AMBERTAX obligates to pay out TAX REFUND to the CLIENT only after CLIENT'S TAX REFUND has been received.
- 2.2.5. AMBERTAX obligates to pay out TAX REFUND according to the option chosen by CLIENT in the "Tax Refund Options" form, except the following cases:
 - If TAX REFUND check which belongs to CLIENT was issued in his/her name by the Tax Authorities of country mentioned in paragraph 1.1. of this contract and due to this reason AMBERTAX is not able to cash this check. AMBERTAX will send this TAX REFUND check to the address provided by CLIENT along with the Invoice for services provided by AMBERTAX.
 - If TAX REFUND amount is less than 40 USD, AMBERTAX keeps the right pay out such TAX REFUND in the form of bank check and will send it to the address provided by CLIENT.
- 2.2.6. AMBERTAX consulting fees mentioned in paragraph 2.1.7. will increase:
 - by 15 USD for financial administration;
 - by 25 USD for each transfer made to CLIENT'S personal bank account and/or to Tax Authorities on behalf of CLIENT;
 - by 15 USD for each payment by check made to CLIENT and/or to tax Authorities on behalf of CLIENT;
 - by 15 USD for each unused or expired TAX REFUND check returned to AMBERTAX;
 - by 40 USD for the "stop payment" on the TAX REFUND check, if that check was not returned to AMBERTAX.
- 2.2.7. All transfers made in euros (EUR) into banks located in EU and EEA countries are free of charge.
- 2.2.8. Ambertax will pay out TAX REFUND if after all AMBERTAX service fees and other expenses TAX REFUND will be 5 USD or more
- 2.2.9. AMBERTAX shall not be responsible for any additional charges imposed by bank correspondent and/or beneficiary's bank.
- 2.2.10. If paragraph 2.1.2., 2.1.4. and 2.1.5. of this contract are not fulfilled, AMBERTAX has the right to impose additional fee of 70 USD per tax year.
- 2.2.1. If CLIENT already tried to refund taxes on it's own and wants AMBERTAX to continue TAX REFUND procedure and/or follow-up TAX REFUND situation and/or receive information about the process, it will be considered as separate income tax return and fees mentioned in paragraph 2.1.7. and 2.2.6. of this contract will apply and the minimum TAX REFUND service fee will have to be paid in advance.
- 2.2.12. AMBERTAX may reduce service fees, depending on the discounts granted to CLIENT.
- 2.2.13. AMBERTAX shall not be held responsible of any tax adjustments made by Tax Authorities of country mentioned in paragraph 1.1. of this contract.
- 2.2.14. If CLIENT requests to receive his/her TAX REFUND in other than original currency of TAX REFUND, AMBERTAX will pay out TAX REFUND in requested currency based on non-cash currency exchange rates published on the date of payment by bank from which transfer is being made.
- 2.2.15. AMBERTAX shall not be held responsible for the failure to refund taxes, or for the tax liability, or for any other negative consequences, which occurred due to false, inaccurate or incomplete information provided by the CLIENT or due to CLIENT'S prior financial commitments to Tax Authorities of country mentioned in paragraph 1.1 of this contract.
- 2.2.16. AMBERTAX shall not be held responsible for any delays by Tax Authorities of country mentioned in paragraph 1.1 of this contract. Published TAX REFUND duration is only approximate time which occurs in AMBERTAX practice. AMBERTAX also shall not be responsible for any changes of legal or other nature regulations regarding the TAX REFUND, but at the same time will put the best efforts to assist CLIENT after such changes will come into force.
- 2.2.17. Upon CLIENT request, AMBERTAX agrees to calculate approximate TAX REFUND amount from the country mentioned in 1.1. paragraph as well as the approximate TAX REFUND service fee. The exact TAX REFUND amount and AMBERTAX service fee will be know only after TAX REFUND will be paid out to AMBERTAX by Tax Authorities.

3. Remuneration Conditions

- 3.1. All fees mentioned in this contract will be deducted from CLIENT'S TAX REFUND except cases mentioned in paragraphs 2.2.5., 3.2., 3.3. and 3.4. of this contract. AMBERTAX keeps the right to deduct whole TAX REFUND consulting fee if at least part of TAX REFUND amount is received. All fees mentioned in this contract include VAT, levy and handling fees.
- 3.2. If CLIENT receives/will receive TAX REFUND check(-s) directly from Tax Authorities, he/she has to pay AMBERTAX for provided (according to this contract) services within 10 days form the date when Invoice is issued by AMBERTAX. Payment can be made in the form of bank check or by wire transfer to AMBERTAX bank account. If this obligation is not fulfilled, AMBERTAX has the right to apply for debt without any further notifications.
- 3.3. If CLIENT is requesting his/her tax return to be filed with Tax Authorities of country mentioned in paragraph 1.1 of this contract, but is not entitled for TAX REFUND, AMBERTAX must receive CLIENT'S payment in the form of bank check or bank transfer of 70 EUR for tax return before CLIENT'S documents are filed to Tax Authorities.
- 3.4. If CLIENT'S total TAX REFUND received form Tax Authorities of country mentioned in paragraph 1.1 of this contract is less than the minimum TAX REFUND fee, AMBERTAX will not require that CLIENT remit AMBERTAX with the difference.

4. Final Provisions

- 4.1. A party is excused of responsibility for non-performance, if the non-performance was due to an impediment (war, natural disaster, fire and etc.), which could not be foreseen and were beyond its control at the time of the conclusion of the contract.
- 4.2. This contract is governed by Lithuanian law. If this contract or legal regulations does not provide otherwise, the law of Republic of Lithuania guides the rights and obligations of the contracting parties.
- 4.3. All disputes and differences that may arise in connection with this contract shall be settled by means of friendly negotiations between the parties. If the parties cannot settle such dispute, then such dispute is to be submitted for settlement to the court according to the AMBERTAX registration place.
- 4.4. This contract is made out in two copies of which each party shall retain one.
- .5. The contract is valid when signed by both contracting parties and received by fax, post, e-mail or in any other way.

Both contracting parties have read this contract, acknowledge that it has complete and full recognition of the terms and conditions, understand them, undertake to comply with them, agree with its contents and affix their signatures below as proof of its correctness and of the fact that this contract corresponds to their true will.

CLI	ENT:
Sig	nature:
Ful	l name:
Pe	rsonal identification number:
Co	untry in which the contract was signed

AMBERTAX:

Simpleta LTD, dba AmberTax Kestucio 57-8, LT-44303 Kaunas, Lithuania Company identification number: 136041128 VAT number: LT360411219 Director: Rimas Petkevicius



services according to the signed contract.

DATE (mm/dd/yyyy): ____m/___d/20____

T: (+370) 37 206041 F: (+370) 37 206045 www.ambertax.com info@ambertax.com P.O. Box 311, LT-44005, Kaunas, Lithuania

TAX REFUND OPTIONS

Before filling this part please contact your bank and find out how **to make international transfer to your personal** account if payment is coming from Lithuania in certain currency!

NOTE: Each international transfer fee is \$25, only transfer in EUR are made for free to clients from EU and EEA. If tax refund amount is less than \$40, AmberTax keeps the right to issue a tax refund check.

AmberTax additionally will charge one-time Financial Administration fee of \$15. This fee covers expenses related with cashing checks which are received from Tax Authorities and it's administration.

noose transfer currency (please mark)	USD	EUR	GBP	CAD
OUR FULL NAME: actly as it appears on your bank account!!)				
JLL BANK NAME:				
ANK CITY AND		Е	BANK S.W.I.F.T.	
COUNTRY:				
Debit/credit card number i	nation for corre	ect transfer to yo	our personal bank acco	
information here:				

SIGNATURE: __





POWER OF ATTORNEY

	Norwegian D-number:
	Date of birth:
	Address:
	I, the undersigned (hereinafter referred to
	the "Mandator"), hereby grant a full authority to SIMPLETA LTD., DBA AMBERTAX, to act as my ag
	(attorney-in-fact) in dealing with my Norwegian Income, individual repayment claims and other
	returns. To deliver and receive any correspondence related to my tax affairs, to claim and receive
	my behalf any tax refund due to me.
	On the basis of this Power of Attorney SIMPLETA LTD. its officers and/or employees are given
	authority:
	1. To request from the employer and to receive Mandator's RF-1015B Certificate of Pay and
	Deducted (Løons-ogtrekoppgave). To request and receive all correspondence from the Norwegian
	Authorities "Skatteetatent" to the following address:
	SIMPLETA LTD.
	DBA AMBERTAX P.O. BOX 311
	LT-44005 KAUNAS, LITHUANIA
	2. To received Personal Income Tax refund checks issued in Mandator's name.
	3. To deposit Personal Income Tax refunds to it's own account and convey such refunds to the
	Mandator by the way of a wire transfer, check or to handle it in another manner to achieve the san
	purpose.
	This Power of Attorney is effective immediately on the date it is signed and is valid for one year after
	was signed.
\	



FULLMAKT / POWER OF ATTORNEY

	Fullt navn / Full name:		
	Fodelsnummer / Norwegian D-number:		
	Fødselsdato / Date of birth:		
	Permanent adresse / permanent address:		
Jeg / I, undertegnede	/ the undersigned heretter referert		
som Mandator, gi full	av myndighet til å SIMPLETA LTD., dba AMBERTAX, å opptre som min agent (advoka		
faktisk) i arbeidet med	min norske inntekt, individuell nedbetaling krav og andre selvangivels. Representanten		
fullmakt til å levere og	motta konfidensiell skatt informasjon og korrespondanse knyttet til mine skatteforhold,		
å kreve og motta på	mine vegne eventuelle skatterefusjon på grunn av meg / hereinafter referred to as t		
Mandator, hereby gran	t a full authority to:		
SIMPLETA LTD., d	lba AMBERTAX, P.O. BOX 311, LT-44005, Kaunas, LITHUANIA,		
to act as my agent (at	torney-in-fact) in dealing with my Norwegian Income, individual repayment claims and t		
returns. The representa	ative is authorized to deliver and receive any confidential tax information and corresponden		
related to my tax affairs	s, to claim and receive on my behalf any tax refund due to me.		
Jeg erklærer at / I decla	re that:		
 Jeg er fullt info 	rmert om alt innholdet i dette skjemaet og forstår fullt ut betydningen av å gi disse		
fullmaktene til represe	ntanten min / I am fully informed as to all the contents of this form and understand the full		
import of granting these	e powers to my representative.		
 Representante 	n gis fullmakt til å motta inntekt refusjon sjekker utstedt i Mandator navn / To receive		
Income Tax refund chec	cks issued in Mandator's name.		
 Jeg gir instruks 	jon om at tilbakebetaling av for mye innbetalt skatt skal innbetales til følgende bankkont		
I agree my refund of over	erpaid taxes to be deposited into the following bank account:		
	"Nordea Bank AB" Lietuvos skyrius Didžioji g. 18, LT-01128 Vilnius, Lietuva IBAN: LT672140030003074602, SWIFT CODE: NDEALT2X		
This Power of Attorney shall become effective immediately on the date signed and shall terminate after one year			
from the date it was sig	ned.		
NAVN / FULL NAME: _	DATO / DATE SIGNED (dd/mm/yyyy): d/ m		



FULLMAKT / POWER OF ATTORNEY

	Fullt navn / Full name:		
	Fodelsnummer / Norwegian D-number:		
	Fødselsdato / Date of birth:		
	Permanent adresse / permanent address:		
Jeg / I, undertegnede	/ the undersigned heretter referert		
som Mandator, gi full	av myndighet til å SIMPLETA LTD., dba AMBERTAX, å opptre som min agent (advoka		
faktisk) i arbeidet med	min norske inntekt, individuell nedbetaling krav og andre selvangivels. Representanten		
fullmakt til å levere og	motta konfidensiell skatt informasjon og korrespondanse knyttet til mine skatteforhold,		
å kreve og motta på	mine vegne eventuelle skatterefusjon på grunn av meg / hereinafter referred to as t		
Mandator, hereby gran	t a full authority to:		
SIMPLETA LTD., d	lba AMBERTAX, P.O. BOX 311, LT-44005, Kaunas, LITHUANIA,		
to act as my agent (at	torney-in-fact) in dealing with my Norwegian Income, individual repayment claims and t		
returns. The representa	ative is authorized to deliver and receive any confidential tax information and corresponden		
related to my tax affairs	s, to claim and receive on my behalf any tax refund due to me.		
Jeg erklærer at / I decla	re that:		
 Jeg er fullt info 	rmert om alt innholdet i dette skjemaet og forstår fullt ut betydningen av å gi disse		
fullmaktene til represe	ntanten min / I am fully informed as to all the contents of this form and understand the full		
import of granting these	e powers to my representative.		
 Representante 	n gis fullmakt til å motta inntekt refusjon sjekker utstedt i Mandator navn / To receive		
Income Tax refund chec	cks issued in Mandator's name.		
 Jeg gir instruks 	jon om at tilbakebetaling av for mye innbetalt skatt skal innbetales til følgende bankkont		
I agree my refund of over	erpaid taxes to be deposited into the following bank account:		
	"Nordea Bank AB" Lietuvos skyrius Didžioji g. 18, LT-01128 Vilnius, Lietuva IBAN: LT672140030003074602, SWIFT CODE: NDEALT2X		
This Power of Attorney shall become effective immediately on the date signed and shall terminate after one year			
from the date it was sig	ned.		
NAVN / FULL NAME: _	DATO / DATE SIGNED (dd/mm/yyyy): d/ m		

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Endring av adresse for personer med D-nummer / Change of address for persons with D-number (non-resident personal identification number)

Personlige opplysninger/Personal information	
D-nummer / D-number, non resident personal	
identifiaction number (11 sifre/11 figures)	
Utenlandsk id.nummer / Personal identification	
number from your country of origin	
Etternavn / Family name	
·	
Mellomnavn / Middle name(s)	
Fornavn / First name	
Nasjonalitet / Nationality	
E-post / e-mail	
Ny adresse i utlandet/New address abroad	
Gate-, veinavn / Street, road	
Postnr. og poststed / Postal code and city or	
town	
Land / Country	
Endringen gjelder f.o.m. / Date of move	
N. J. N. W. Warneddwess in Newyor	
Ny adresse i Norge/New address in Norway	
Gate, veinavn / Street, road	
Postnr. og poststed / Postal code and city or	
town	
Land / Country	
Land / Country	
Dato og signatur/Date and signature:	
	√ X



International Tax Collection Authority Postboks 8103 4068 Stavanger Norway

Kontoopplysninger/Bank Account Details

Navn / Name
Dnr./fnr (11 siffer) / Norwegian personal identification number (11 digits)
Kontonummer / Bank account number
Bankkontonummer <u>må</u> dokumenteres ved bekreftelse fra bank, der det framgår at du er innehaver eller disponerer kontoen. The bank account number <u>must be</u> confirmed by documentation from your bank, stating that you are the account holder or that you have the power of disposition.
BIC / SWIFT
IBAN
Hvis banken ikke har en BIC/SWIFT eller en IBAN-adresse, skal bankkoden brukes. If your bank does not operate with a BIC or SWIFT enter the bank-code.
Sted og dato / Place and date
Underskrift / Signature

Underskriften <u>må</u> bekreftes ved kopi av pass, og inneholde:/The signature has to be confirmed by a copy of your passport which states:

- Personopplysninger / Your personal data
- Underskriften din / Your signature

<u>Bankkontoopplysningene vil ikke bli registrert dersom skjemaet er ufullstendig utfyllt eller dokumentasjon mangler.</u>

<u>Forms with incomplete information or missing documentation will not be considered for registration.</u>



T: (+370) 37 206041 F: (+370) 37 206045 www.ambertax.com info@ambertax.com P.O. Box 311, LT-44005, Kaunas, Lithuania

Tul / To,

ivelse/Skatteligning/Income tax return/Assessment
Fullt navn / Full name:
Fodelsnummer / Norwegian D-number:
Skatteår / Tax Year:
vil be om at min forhåndstryk
tteligningen og all annen skatterelatert korrespondanse blir sendt i mitt navn
/ would like to request my pre-printed tax return, my tax settlement notice and all oth
oondence send in my name to the following address:
AmberTax
P.O. BOX 311
LT-44005 KAUNAS,
LITHUANIA
a