



Rothwell
international

Rothwell International BV

Registration Form

CONTRACTOR'S PERSONAL DETAILS												
Title:							Gender:	Male	<input type="checkbox"/>	Female	<input type="checkbox"/>	
Surname (Family name):												
Full First Names:							Preferred Name:					
Maiden Name: (if applicable)												
Date of Birth (dd/mm/yyyy)					Nationality:							
Passport Number:	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Country Issued :						Expiry Date (dd/mm/yyyy):						
Marital Status:	Single	Married	Divorced	Joint Household	Spouse Deceased							
Foreign - Residential Address:												
Street:												
ZIP / Postal Code:				City:				Country:				
Period residing in foreign address:	From:	dd/mm/yyyy					To:					
Netherlands – Residential Address:												
Street:												
ZIP / Postal Code:				City:				Country:				
Mobile phone:							E-mail address					
Dutch Work Permit:	Yes	<input type="checkbox"/>	No	<input type="checkbox"/>	EU/EEA Citizen							
BSN / Sofi number:												
Do you give us permission to apply the general discount on your Dutch tax and national insurance contributions:						Yes	<input type="checkbox"/>	No	<input type="checkbox"/>	Legally we need written permission in order to give you this discount!		
30 % TAX RULING												
Do you have a 30% Tax Ruling?				Yes	<input type="checkbox"/>	No	<input type="checkbox"/>	If you do, we can transfer it to our company				
If not, do you want us to apply for this Ruling?				Yes	<input type="checkbox"/>	No	<input type="checkbox"/>					
Conditions to apply successfully for 30 % Ruling:												
1	Did you live more than 150km's from the Dutch border in the 24 months before your first working day in the Netherlands?						Yes	<input type="checkbox"/>	No	<input type="checkbox"/>		
2	Date of arrival in the Netherlands (dd/mm/yyyy)											
3	Did you work in the Netherlands before			Yes	<input type="checkbox"/>	No	<input type="checkbox"/>					
	If Yes , confirm dates			From: dd/mm/yyyy			To:					
4	Did you live in the Netherlands before			Yes	<input type="checkbox"/>	No	<input type="checkbox"/>					
	If Yes , confirm dates			From: dd/mm/yyyy			To:					
CONTRACTOR'S SIGNATURE						DATE dd/mm/yyyy						



Rothwell
international

CONTRACT INFORMATION						
The ultimate Company where services are to be rendered:						
Base Location :						
Job Title / Position:						
Sector / Industry :						
Client Company Name:						
Contact Person at Client Company:						
Email address:						
Contact number :						
Rate offered by Client:		Hourly:	€	Daily:	€	Monthly: €
Contract Start Date (dd/mm/yyyy) :				End Date:		
Negotiated notice period :			Negotiated payment terms (days):			

Bank Details															
Account Holders Name:															
Name of Bank:															
Full Address of Bank:															
IBAN Number:															
Account Number:															
SWIFT Code:															
CONTRACTOR'S SIGNATURE												DATE dd/mm/yyyy			

REMEMBER! - PLEASE SEND COPIES OF THE FOLLOWING DOCUMENTS

ID / Passport document :	
CV / Resume :	
Dutch Work Permit (if applicable):	
Last 30% Ruling Statement (if applicable):	