INLAND REVENUE DEPARTMENT
NOTIFICATION
BY AN EMPLOYER OF AN EMPLOYEE WHO COMMENCES TO BE EMPLOYED
(Under section 52(4) of the Inland Revenue Ordinance, Cap. 112)

Prepare a fresh form for another employee

56E

To be completed and returned **within 3 months** from date of commencement of employment

☐ Replacement – correcting the form submitted on _____ (DD/MM/YYYY)
("✓" the above box where applicable and fill in the date)

All correspondence should be sent to: P.O. Box 28777 Gloucester Road Post Office, Hong Kong

Particulars of the employer: -

1. Employer's File No. (If not available, state your Business Registration No.) . . . . . ☐☐☐ ☐☐☐☐☐☐☐☐

   If you do not have Employer's File No./Business Registration No., state your H.K. Identity Card Number _____

   Name of Employer
   (The business name is required) _____

   Address of Employer _____

Particulars of the employee: -

2. Name of Employee (Surname first, followed by a comma and then Given Name. See Example at the bottom) *

Mr/Mrs/Ms/Miss # # (Delete whichever is inapplicable)	Full Name in English	
	Full Name in Chinese	

3. (a) H.K. Identity Card Number . . . . . **(This field must be completed) →** ☐☐ ☐☐☐☐☐☐ (☐)

   (b) Passport Number and place of issue (if Employee has no H.K. Identity Card) _____

4. Sex (M=Male, F=Female) . . . . . **(This box must be completed) →** ☐

5. Marital Status (1=Single/Widowed/Divorced/Living Apart, 2=Married) . . . . . ☐

6. (a) If married, full name of spouse _____

   (b) Spouse's H.K. Identity Card Number/Passport Number and place of issue (if known) _____

7. Residential Address _____

8. Postal Address (if different from item 7 above) _____

9. Capacity in which employed _____

10. Date of Commencement of Employment . . . . . **(This field must be completed) →** ☐☐ ☐☐ ☐☐☐☐
    Day Month Year

11. Terms of Employment

    (a) Monthly Rate of Fixed Income . . . . . **(This field must be completed) →** ☐☐☐ ☐☐☐ ☐☐☐
    HK$ [EXCLUDE CENTS]

    (b) Monthly Rate of Allowance (e.g. Cost of Living) HK$ _____

    (c) Fluctuating Income (e.g. Commission, Bonus, Gratuities) HK$ _____

    (d) Particulars of Place of Residence provided (0=Not provided, 1=Provided) . . . . . **(This box must be completed) →** ☐

Address	Nature (e.g. House, Flat, Serviced Apartment, No. of Rooms in Hotel, etc.)	Monthly Rent Paid to Landlord by Employer (HK$)	Monthly Rent Paid to Landlord by Employee (HK$)	Monthly Rent Refunded to Employee by Employer (HK$)	Monthly Rent Paid to Employer by Employee (HK$)

12. Whether the employee was wholly or partly paid either in Hong Kong or elsewhere by a non-Hong Kong company (0=No, 1=Yes)
    (This box must be completed) → ☐

    If yes, please state: Name of the non-Hong Kong company _____

    Address _____

13. Whether the employee has been **conditionally** granted a share option prior to commencing to be employed in Hong Kong, which can be exercised after rendering services in Hong Kong (0=No, 1=Yes) . . . . . **(This box must be completed) →** ☐

    If yes, supply information, as an attachment, on details of the number and type of shares covered by the option, the consideration (if any) paid for the grant of the option, the consideration required to exercise the option and the period within which the option must be exercised.

Space for Employer's official chop

Signature _____
Name _____
Designation _____
Date _____

* Example: Surname and Given Name of Employee are "CHAN" and "TAI MAN" respectively, complete as
C H A N , T A I M A N

IR56E (12/2018)

Please provide a copy of the completed Form to your employee

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