



INLAND REVENUE DEPARTMENT  
STAMP OFFICE

3/F, Revenue Tower, 5 Gloucester Road,  
Wan Chai, Hong Kong.

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FOR OFFICIAL USE

**Partial Refund of Ad Valorem Stamp Duty Paid under  
section 29DF of the Stamp Duty Ordinance (Cap. 117)** <sup>(Note)</sup>

I, \_\_\_\_\_, hereby claim for refund of stamp duty paid under section 29DF of the Stamp Duty Ordinance.

**(I) Amount of Refund: \$** \_\_\_\_\_

**(II) Details of the Agreement for Sale and Purchase for acquisition of the new residential property (and car parking space)\***

- Date of Agreement: \_\_\_\_\_
- Date of Conveyance on Sale /Deed of Gift: \_\_\_\_\_

Amount of ad valorem stamp duty ("AVD") paid: \$ \_\_\_\_\_

Property Address: \_\_\_\_\_

**(III) Details of the Agreement for Sale and Purchase and/or Conveyance on Sale or Deed of Gift of the original residential property (and car parking space)\***

Date of Agreement\*: \_\_\_\_\_

Date of Conveyance on Sale /Deed of Gift: \_\_\_\_\_

Property Address: \_\_\_\_\_

**(IV) Supporting documents are attached (See Annex)**

Please issue refund cheque to the following person / company\*:

Name of Payee: \_\_\_\_\_

(It should be the name of the person/company who paid the stamp duty)

Address of Payee: \_\_\_\_\_

**If a change of the payee's name on refund cheque is required, please authorize such change by providing a letter of indemnity from each of the payer(s) of the stamp duty and the payee of the refund cheque.**

Name of Applicant: \_\_\_\_\_

Signature of Applicant: \_\_\_\_\_ Date: \_\_\_\_\_

H.K.I.C. B.R. No.: \_\_\_\_\_

Capacity:  Purchaser  Others (please specify) \_\_\_\_\_

Address (if different from the above): \_\_\_\_\_

Telephone No: \_\_\_\_\_ Fax No: \_\_\_\_\_

\* delete whichever inapplicable

( tick as appropriate)

Note: The application should be made to the Collector of Stamp Revenue **within 2 years** after the date of the agreement for sale and purchase for acquisition of the new residential property (and car parking space, if applicable) or within **two months** from the date of Assignment for disposal of the original residential property (and car parking space, if applicable), whichever is the later.

## **Annex**

To support this application, the following documents are attached:

- (1) Document(s) showing that the AVD was paid
  - (a) copy of stamp certificate (for e-stamping case only)
  - (b) original stamp certificate (for paper application without presenting original instrument case only)
  - (c) original stamped instrument (for conventional stamping case only)
- (2) Original Statutory Declaration (IRSD131C)

**If a change of the payee's name on refund cheque is required, please also provide the following documents:**

- (3) Original letter of indemnity of each of the payer(s) of stamp duty ; and
- (4) Original letter of indemnity of the payee of the refund cheque

\* delete whichever inapplicable

( tick as appropriate)

**償還稅款保證書 (供支付印花稅者填報)**  
**Letter of Indemnity (for Payer of Stamp Duty)**

致：香港灣仔告士打道 5 號稅務大樓 3 樓  
印花稅署署長

To : Collector of Stamp Revenue  
3/E, Revenue Tower, 5 Gloucester Road,  
Wanchai, Hong Kong

檔案號碼 File No : \_\_\_\_\_

款額 Amount: \_\_\_\_\_

茲證明：

(1) 本人/我們/本公司根據《印花稅條例》(第 117 章) 可獲退還上述印花稅稅款。

(2) 本人/我們/本公司現授權印花稅署署長簽發上述退還款項的港元支票，支付給 \_\_\_\_\_(收款人姓名/名稱)。

(3) 據本人/我們/本公司所知及所相信，沒有其他人曾提出或將提出申請上述退款。

(4) 除本申請以外，本人/我們/本公司承諾不會提出任何其他申請退還上述稅款，或就本申請內容作出任何更改或撤回申請。

It is certified that :

(1) I/We/This company is entitled to a refund of the above amount of stamp duty in accordance with the Stamp Duty Ordinance (Cap. 117).

(2) I/We/ This company now authorize(s) the Collector of Stamp Revenue to issue a refund cheque in the sum as shown above to \_\_\_\_\_(name of payee).

(3) To the best of my/our/this company's knowledge and belief no other person has made or will make any application for refund the said stamp duty.

(4) Apart from this application, I/we/ this company covenant(s) not to make any further application for refund of the said stamp duty, or any amendments to the details nor withdrawal of this application.

右方簽署的見證人

Witness to the  
Signature on the right

簽署 Signature: \_\_\_\_\_

姓名 Name: \_\_\_\_\_  
請用正楷 (in block letter)

地址 Address : \_\_\_\_\_  
請用正楷 (in block letter)

香港身份證號碼  
HK Identity Card No. \_\_\_\_\_

日期 Date: \_\_\_\_\_

# 支付印花稅的人士或公司

The name of the person/company who paid the stamp duty  
L/I (1) (4/2017)

申請人#

Applicant #

簽署 Signature: \_\_\_\_\_

姓名 Name: \_\_\_\_\_  
請用正楷 (in block letter)

地址 Address : \_\_\_\_\_  
請用正楷 (in block letter)

香港身份證號碼/  
商業登記號碼  
HK Identity Card No.  
Business Registration No. \_\_\_\_\_

日期 Date: \_\_\_\_\_

**償還稅款保證書 (供退款支票收款者填報)**  
**Letter of Indemnity (for Payee of Refund Cheque)**

致：香港灣仔告士打道 5 號稅務大樓 3 樓  
印花稅署署長

To : Collector of Stamp Revenue  
3/F, Revenue Tower, 5 Gloucester Road,  
Wanchai, Hong Kong

檔案號碼 File No : \_\_\_\_\_

款額 Amount: \_\_\_\_\_

茲證明：

(1) \_\_\_\_\_ (支付有關印花稅的人士/公司)  
根據《印花稅條例》(第 117 章)可獲退還上述印花稅稅款，並授權印花稅署署長簽發上述退還款項的港元支票給本人/我們/本公司。

(2) 據本人/我們/本公司所知及所相信，沒有其他人曾提出或將提出本人/我們/本公司現申索的退款。

(3) 除本申請以外，本人/我們/本公司承諾不會提出任何其他申請退還上述稅款，或就本申請內容作出任何更改或撤回申請。

(4) 本人/我們/本公司現承諾及同意，就你由於本人/我們/本公司獲退還上述的已付稅款而可能遭受或引致的所有法律行動，法律程序，損失，費用，損害，開支，索償及申索，對你作出彌償，以避免你遭受任何損害。

It is certified that :

(1) \_\_\_\_\_ (the name of the person/company who paid the stamp duty) is entitled to a refund of the above amount of stamp duty in accordance with the Stamp Duty Ordinance (Cap. 117), and has authorized the Collector of Stamp Revenue to issue a refund cheque in the sum as shown above to me/us/this company.

(2) To the best of my/our/this company's knowledge and belief no other person/company has made or will make any application for refund now claimed by me/us/this company.

(3) Apart from this application, I/we/this company covenant(s) not to make any further application for refund of the said stamp duty, or any amendments to the details nor withdrawal of this application.

(4) In consideration of the refund to me/us/this company of the above amount of stamp duty, I/we/this company hereby undertake(s) and agree(s) to indemnify you and save you harmless thereof from and against all actions, proceedings, losses, charges, damages, expenses, claims and demands which may be brought or made against you.

右方簽署的見證人

Witness to the signature  
on the right

簽署 Signature: \_\_\_\_\_

姓名 Name: \_\_\_\_\_

請用正楷 (in block letter)

地址 Address : \_\_\_\_\_

請用正楷 (in block letter)

香港身份證號碼

HK I/D Card No \_\_\_\_\_

日期 Date: \_\_\_\_\_

收款人

Payee

簽署 Signature: \_\_\_\_\_

姓名 Name: \_\_\_\_\_

請用正楷 (in block letter)

地址 Address : \_\_\_\_\_

請用正楷 (in block letter)

香港身份證號碼/

商業登記號碼

HK Identity Card No./

Business Registration No. \_\_\_\_\_

日期 Date: \_\_\_\_\_