

**TAXES MANAGEMENT (PASSENGER CABIN TAX PRESCRIBED  
FORMS) REGULATIONS 2000**

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**BR 27/2000**

**TAXES MANAGEMENT ACT 1976**

**TAXES MANAGEMENT (PASSENGER CABIN TAX PRESCRIBED  
FORMS) REGULATIONS 2000**

In exercise of the powers conferred on the Minister of Finance by section 50 of the Taxes Management Act 1976, the following regulations are hereby made:—

**Citation**

1 These Regulations may be cited as the Taxes Management (Passenger Cabin Tax Prescribed Forms) Regulations 2000.

**Prescription of forms for passenger cabin tax**

2 The following forms set out in the Schedule are prescribed for the purposes of passenger cabin tax—

- (a) form PCT1, being the form of application for registration under section 6 of the Taxes Management Act 1976 in respect of passenger cabin tax; and
- (b) form PCT2, being the form of return to be furnished for the purposes of section 7 of that Act in respect of passenger cabin tax.

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**SCHEDULE**

Form PCT1

**GOVERNMENT OF BERMUDA**

**TAXES MANAGEMENT ACT 1976 - SECTION 6**

**PASSENGER CABIN TAX**

**APPLICATION TO REGISTER FOR TAX**

ACCOUNT NUMBER |

1. NAME OF OWNER: -----  
BUSINESS ADDRESS: -----  
TELEPHONE/FAX NUMBER: -----  
MAILING ADDRESS: -----
  
2. NAME OF OPERATOR: -----  
BUSINESS ADDRESS: -----  
TELEPHONE/FAX NUMBER: -----  
MAILING ADDRESS: -----
  
3. NAME OF AGENT: -----  
BUSINESS ADDRESS: -----  
TELEPHONE/FAX NUMBER: -----  
MAILING ADDRESS: -----
  
4. NAME OF PASSENGER SHIP(S): -----  
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I HEREBY DECLARE THE FOREGOING TO BE TRUE TO THE BEST OF MY KNOWLEDGE.

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SIGNED ..... DATE.....  
OWNER

Form PCT2

**GOVERNMENT OF BERMUDA**

**TAXES MANAGEMENT ACT 1976 - SECTION 7**

**PASSENGER CABIN TAX RETURN**

ACCOUNT NUMBER |

RETURN FOR THE PERIOD:----- 20/ ---

1. NAME OF PASSENGER SHIP-----
2. NAME OF OWNER, OPERATOR OR AGENT:-----
3. BUSINESS ADDRESS:-----
4. TELEPHONE NUMBER:-----
5. DATE OF ARRIVAL:----- DATE OF DEPARTURE:-----
6. TAX CALCULATION:

NUMBER OF PASSENGER CABINS	NUMBER OF NIGHTS	TOTAL CABIN NIGHTS	TAX RATE*	TAX PAYABLE
TOTAL PASSENGER CABIN TAX PAYABLE				

Signed..... Date .....  
Owner, operator, agent

**Note:** Payment should be submitted to the Tax Commissioner within 7 days of departure of a ship.

\* **Tax Rate:**

FOR OFFICIAL USE  
ONLY

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Rate per passenger cabin per night is:

\$12.00 - May 1 to Aug 31

\$ 8.00 - Sept 1 to Oct 31

Nil - Nov 1 to April 30 (except for passenger ships listed in Schedule 2 to the Miscellaneous Taxes Rates Act = \$8.00)

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Made this 27<sup>th</sup> day of March, 2000

Minister of Finance