

VAT EXEMPTION FORM



SUPPLY TO A CHARITY

(Photocopy as required)

I (Full name & status)

Of (Name & Address of charity)

declare that the charity named above is receiving from **Liberator Ltd**

1. The following goods which are to be available to one or more people with handicaps for domestic use (describe goods): _____

2. The following services to adapt goods to suit the condition of a person with a handicap (describe service): _____

and I claim that the supply of these goods or services is eligible for relief from Value Added Tax under Group 14 of Zero Rate Schedule of the Value Added Tax Act 1983.

Signature

Date

There are severe penalties for making a false declaration. If you are in any doubt about your own eligibility or the eligibility of the goods and services you are buying you should seek advice from any local VAT office before signing the declaration

This section is for office use only

Contact

Our Invoice Number if applicable

Order Number

SUPPLY TO AN INDIVIDUAL (Photocopy as required)

I (Full name & status)

Of (Address)

Declare that I am an eligible person under paragraph 1 of leaflet 701./7/02 that I have (description of disability):

and that I am receiving from **Liberator Ltd**

1. The goods which are being supplied to me for domestic or my personal use (describe goods):

2. The following services to adapt goods to suit my condition (describe service):

3. The following services of repair or maintenance of goods (describe service)

and I claim that the supply of these goods or services is eligible for relief from Value Added Tax under Group 14 of the Zero Rate Schedule of the Value Added Tax Act 1983.

Signature

Date

There are severe penalties for making a false declaration. If you are in any doubt about your own eligibility or the eligibility of the goods and services you are buying you should seek advice from any local VAT office before signing the declaration

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