

F1F2F3F4F5 SCHEDULE 1

Regulation 5(1)

Textual Amendments

- F1** Sch. Form 4 substituted (1.4.2001) by [The Value Added Tax \(Amendment\) Regulations 2001 \(S.I. 2001/630\)](#), [reg. 1](#), [Sch.](#)
- F2** Sch. 1 Form 5 substituted (1.4.2001) by [The Value Added Tax \(Amendment\) Regulations 2001 \(S.I. 2001/630\)](#), [reg. 1](#), [Sch.](#)
- F3** Sch. 1 Form 7A inserted (22.3.2000) by [The Value Added Tax \(Amendment\) \(No. 3\) Regulations 2000 \(S.I. 2000/794\)](#), [reg. 7](#), [Sch. 1](#)
- F4** Sch. 1 Forms 1 and 2 substituted (1.1.2002) by [The Value Added Tax \(Amendment\) \(No. 3\) Regulations 2001 \(S.I. 2001/3828\)](#), [reg. 3](#), [Sch.](#)
- F5** Sch 1 Forms 4 and 5 substituted (22.7.2004) by [The Value Added Tax \(Amendment\) \(No. 3\) Regulations 2004 \(S.I. 2004/1675\)](#), [reg. 6\(1\)\(2\)](#), [Sch.](#)

Commencement Information

- I1** Sch. 1 in force at 20.10.1995, see [reg. 1](#)

Form No. 1

Status: Point in time view as at 22/07/2004.

Changes to legislation: There are currently no known outstanding effects for the The Value Added Tax Regulations 1995, SCHEDULE 1 . (See end of Document for details)

Regulation 5(1)



HM Customs and Excise

Value Added Tax

Application for registration

Please read VAT Notice 700/1: **Should I be registered for VAT?** before you begin to complete the application form as the explanatory notes will help you.
If you have any problems completing the form please contact the National Advice Service on 0845 010 9000 or visit our website at www.hmce.gov.uk.

You must answer all questions as directed.
Write clearly in black ink and use CAPITAL LETTERS

VAT 1

Status: Point in time view as at 22/07/2004.
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Business activities

5 Please tell us about all your current and/or intended business activities.

(Continue on a separate sheet if necessary)

6 Are you or any of the partners or directors in the business you are seeking to register through this application, involved in running any other businesses either as a sole proprietor, partner or director? (Please tick)

Yes No

If **yes**, please give the names of these businesses and VAT registration numbers where appropriate.
 (Continue on a separate sheet if necessary)

7 Have you, or any of the partners or directors in the business you are seeking to register through this application, been involved in running any other businesses either as a sole proprietor, partner or director in the past two years? (Please tick)

Yes No

If **yes**, please give the names of these businesses and VAT registration numbers where appropriate.
 (Continue on a separate sheet if necessary)

8 Is your business involved in any other activities registered with or authorised by Customs and Excise? (Please tick boxes as appropriate)

- | | |
|---|--|
| <input type="checkbox"/> Excise duties | <input type="checkbox"/> Imports/exports |
| <input type="checkbox"/> Landfill tax | <input type="checkbox"/> Air passenger duty |
| <input type="checkbox"/> Insurance premium tax | <input type="checkbox"/> Climate change levy |
| <input type="checkbox"/> Aggregates levy
(From 1/4/2002) | |

9 Are you registering as the representative member of a VAT group? (Please tick)

Yes No

If **yes**, you must provide the additional information set out on forms VAT 50 and VAT 51 (available from the National Advice Service tel: 0845 010 9000 or our website).

Part 2 About the business accounts

VAT returns

10 Do you expect to receive regular repayments of VAT? (Please tick)

Yes No

Do not answer **yes** if you believe that the majority of your VAT returns will show an overall payment of tax due to Customs and Excise.

Status: Point in time view as at 22/07/2004.

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Computer accounts

11 Is your accounting system computerised?
(Please tick)

Yes No

If **yes**, please give details of the software used in compiling your accounts.

Software

Version

Bank details

12 Please give details of the bank or building society account that you use for the business.

Sort code

Account number

or Girobank account number

Part 3 The taxable turnover and date of registration

Start of business

For the purposes of VAT, all the goods or services you supply which are VAT-rated – even zero-rated goods or services – are called 'taxable supplies', whether you are registered for VAT or not. The purchases you make for your business are not your taxable supplies.

13 Have you made any taxable supplies yet?
(Please tick)

Yes No

If **yes**, give the date of your first taxable supply.
If **no**, give the date you expect it to be.

Date of first taxable supply

Business transfers

14 Have you taken over a VAT registered business from someone else as a going concern, or changed the legal entity that owns the business (for example from a sole proprietor to a limited company)? (Please tick)

Yes No (If no proceed to question 18)

If **yes**, what date did the transfer of the business or change in legal entity take place?

15 Who was the previous owner?

16 What was their VAT number?

17 Do you want to keep this number? (Please tick)

Yes No

If **yes**, you and the previous owner must also complete and return form VAT 68 (available from the National Advice Service tel: 0845 010 9000 or our website). If you do keep the VAT number, remember that you will become liable for the previous owner's VAT debts.

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Your taxable turnover and date of registration

We need the following information to determine whether you need to be registered, or whether you are entitled to be registered. The total value of your taxable supplies (see 'Start of business' above) is called your taxable turnover. The question of whether you need to be registered for VAT will depend upon the level of your taxable turnover in any past period of 12 months or less, or on the anticipated level of your taxable turnover in any period then beginning of 30 days alone.

18 Have your taxable supplies, in the past 12 months or less, gone over the registration limit and/or has there been a point in the past when taxable supplies in the previous 12 months or less exceeded the registration limit? (Please tick) Yes No

If **yes**, please give the date they exceeded. (The current limits are in Notice 700/1: **Should I be registered for VAT?**)

My taxable supplies exceeded the threshold on

You will be registered from the first day of the second month following, eg. If your taxable supplies exceeded the threshold in June you will be registered from 1st August.

19 Do you expect the taxable supplies you will make in the next 30 days alone will exceed the registration limit and/or has there been a date in the past when there were grounds for believing that your taxable supplies would exceed the registration limit in the next 30 days alone? (Please tick) Yes No (If no proceed to question 22)

My expectation arose on

You will be registered from the date the expectation arose.

20 Do you wish to be registered from a date earlier than the date on which you are obliged to be registered? (Please tick) Yes No (If no proceed to question 23)

21 From what date would you like to be registered? (Proceed to question 23)

Voluntary registration

22 I am applying for voluntary registration because: (Please tick)

- My taxable turnover is below the current registration threshold.
- I am not currently making taxable supplies but intend to in the future.
- I am established or have a fixed establishment in the UK and make or intend to make supplies only outside the UK.

I would like to be registered from

Value of your supplies

23 Please estimate the value of taxable supplies you expect to make in the next 12 months. £

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24	Do you expect to make any exempt supplies?	<input type="checkbox"/> Yes <input type="checkbox"/> No
	(For more information about exempt supplies see Notice 700/1: Should I be registered for VAT?) (Please tick)	If yes , estimate the value of exempt supplies you expect to make in the next 12 months. <input type="text" value="£"/>
25	EC Trade (A list of EC Member States is in Notice 700/1: Should I be registered for VAT?)	
	Please tell us the value of goods you are likely to buy from other EC Member States or sell to other EC Member States in the next 12 months	Buy <input type="text" value="£"/> Sell <input type="text" value="£"/>

Exemption from registration		
26	Do you want exemption from registration because your taxable supplies are wholly or mainly zero-rated?	<input type="checkbox"/> Yes <input type="checkbox"/> No
		If yes , give the expected value of your zero-rated supplies in the next 12 months. Zero-rated supplies <input type="text" value="£"/>

Part 4 Your details and declaration

Home address and National Insurance number	
27	Please give your full home address and your National Insurance number
	<ul style="list-style-type: none">• Sole proprietors – give your home address and National Insurance number below• Partnerships – give home address and National Insurance numbers of all partners on form VAT 2• Corporate bodies – give home address and National Insurance number of the director, company secretary or authorised signatory signing the application form. If you are signing as an authorised signatory include a letter of authorisation signed by a director or company secretary. This must include their home address and National Insurance number.• Unincorporated bodies – give home address and National Insurance number of the person signing the application form.
Home address (If you have lived at this address for less than three years please provide details of your previous home address on a separate sheet)	<input type="text"/> <input type="text"/> <input type="text"/> Postcode <input type="text"/>
National Insurance number If you do not have a National Insurance number please give your Tax Identification number issued by your country of origin.	National Insurance number <input type="text"/> Tax identification number <input type="text"/>

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Declaration

28 Please sign and date the declaration below
 (Corporate bodies – a director, company secretary or authorised signatory must sign the form)

(Insert full name in BLOCK CAPITALS)

I declare that the information given on this form and accompanying document is true and complete.

Signature

Date

Your position in the business (Please tick one box)

Proprietor Partner

Director Company Secretary

Trustee _____

Other (Please give details)

Checklist

- Have you signed the form?
- Partnership? **Remember to complete and enclose form VAT 2**
- VAT group? **Remember to complete and enclose forms VAT 50 and VAT 51**
- Corporate body? **Have you completed the incorporation details in question 3?**
- Applying on a voluntary basis because you are not trading yet? **Remember to enclose evidence of your intention to trade such as copies of contracts, details of purchases for your business etc.**
- Taking over a VAT registration number from a previous owner? **Remember to complete and enclose form VAT 68 if you wish to retain the VAT number**
- Involved in land or property-related supplies where you are electing to waive exemption from VAT (opting to tax)? **Have you enclosed details as per Notice 700/1: Should I be registered for VAT?**
- Have you notified the Inland Revenue of your business start up?

What to do next?

When you have completed and signed this form please send it to the address given in Notice 700/1
Should I be registered for VAT? Provided you have given all the necessary information we will usually register and give you a VAT registration number within 15 working days of receiving your application form.

Data Protection Act 1998


HM Customs and Excise collects information in order to administer the taxes for which it is responsible (such as VAT, insurance premium tax, excise duties, air passenger duty, landfill tax), and for detecting and preventing crime. Where the law permits we may also obtain information about you from third parties, or give information to them. This would be to check its accuracy, prevent or detect crime or protect public funds in other ways. These third parties may include the police, other government departments and agencies.

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VALUE ADDED TAX
Partnership Details


HM Customs and Excise

For official use only
Date of receipt

Registration No. (where known)

Each partner should complete one of the sections below.
Please start at the beginning of each line and leave a space between words.
Please use BLOCK CAPITALS and write clearly in ink.

1

Full name

Home address

Postcode

Home telephone Mobile telephone

National Insurance Number or Tax Identifier in country of origin

Signature Date

Partner details

2

Full name

Home address

Postcode

Home telephone Mobile telephone

National Insurance Number or Tax Identifier in country of origin

Signature Date

Partner details

3

Full name

Home address

Postcode

Home telephone Mobile telephone

National Insurance Number or Tax Identifier in country of origin

Signature Date

Partner details

4

Full name

Home address

Postcode

Home telephone Mobile telephone

National Insurance Number or Tax Identifier in country of origin

Signature Date

VAT 2 PT (November 2001) Please continue overleaf ➡

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Partner details	
5	Full name <input type="text"/>
	Home address <input type="text"/>
	Postcode <input type="text"/>
	Home telephone <input type="text"/> Mobile telephone <input type="text"/>
	National Insurance Number or Tax Identifier in country of origin <input type="text"/>
	Signature <input type="text"/> Date <input type="text"/>
Partner details	
6	Full name <input type="text"/>
	Home address <input type="text"/>
	Postcode <input type="text"/>
	Home telephone <input type="text"/> Mobile telephone <input type="text"/>
	National Insurance Number or Tax Identifier in country of origin <input type="text"/>
	Signature <input type="text"/> Date <input type="text"/>
Partner details	
7	Full name <input type="text"/>
	Home address <input type="text"/>
	Postcode <input type="text"/>
	Home telephone <input type="text"/> Mobile telephone <input type="text"/>
	National Insurance Number or Tax Identifier in country of origin <input type="text"/>
	Signature <input type="text"/> Date <input type="text"/>
Partner details	
8	Full name <input type="text"/>
	Home address <input type="text"/>
	Postcode <input type="text"/>
	Home telephone <input type="text"/> Mobile telephone <input type="text"/>
	National Insurance Number or Tax Identifier in country of origin <input type="text"/>
	Signature <input type="text"/> Date <input type="text"/>
Partner details	
9	Full name <input type="text"/>
	Home address <input type="text"/>
	Postcode <input type="text"/>
	Home telephone <input type="text"/> Mobile telephone <input type="text"/>
	National Insurance Number or Tax Identifier in country of origin <input type="text"/>
	Signature <input type="text"/> Date <input type="text"/>

IAT 2 reverse (11/01)

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Regulation 6(1)

Both Parts of this application form must be filled in

Part 1 To be completed by the new owner

Part 2 To be completed by the previous owner

*I/we took over a business as a going concern on

date	19
from	(name of previous owner)

*I/we enclose/have already returned Form VAT 1, and apply to use the previous owner's VAT registration number

--	--	--	--	--	--	--	--	--	--

If the application is granted *I/we agree:

- to send *my/our first VAT return to Customs and Excise with all the VAT due for the whole period covered by the return
- to send in any returns due from but not made by the previous owner
- to pay Customs and Excise, when asked, any VAT due on supplies made by the previous owner before the business was transferred - including any VAT on stocks and assets kept by the previous owner.
- that any return made in the previous owner's name for a period after the transfer date will be regarded as made by *me/us
- that any payment made by Customs and Excise to the previous owner before the reallocation of the registration number will satisfy any right *I/we have to that money.

Signature(s) _____

 (Proprietor, partners, director, company secretary)

date _____ 19

*delete as necessary

*I/we transferred a business as a going concern on

date	19
to	(name of new owner)

From that date *I am/we are no longer liable or eligible to be registered or *I/we withdraw *my/our request for voluntary registration. *I/we agree to the VAT registration number shown opposite being allocated to the new owner.

If the application is granted *I/we declare that:

- the new owner will be entitled to reclaim any input tax which *I/we could have reclaimed if the registration number had not been transferred
- any payment made by Customs and Excise to the new owner will satisfy any right *I/we have to that money
- *I/we have retained stocks and assets valued at £ _____, including VAT.

I/we can be contacted at the following address after the date of transfer:

Signature(s) _____

 (Proprietor, partners, director, company secretary, executor)

date _____ 19

*delete as necessary

Status: Point in time view as at 22/07/2004.
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Regulation 25(1)



Value Added Tax Return
For the period
to

For Official Use

Registration number	Period
<input type="text"/>	<input type="text"/>

If your completed return and all the VAT payable are not received by the due date you will be in default and may be liable to a financial penalty

Due Date:

For official use D O R only	<input type="text"/>
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Before you fill in this form please read the notes on the back and the VAT leaflets "Filling in your VAT return" and "Flat rate scheme for small businesses", if you use that scheme. Fill in all boxes clearly in ink, and write 'none' where necessary. Don't put a dash or leave any box blank. If there are no pence write "00" in the pence column. Do not enter more than one amount in any box.

		£	p
For official use	VAT due in this period on sales and other outputs	1	<input type="text"/>
	VAT due in this period on acquisitions from other EC Member States	2	<input type="text"/>
	Total VAT due (the sum of boxes 1 and 2)	3	<input type="text"/>
	VAT reclaimed in this period on purchases and other inputs (including acquisitions from the EC)	4	<input type="text"/>
	Net VAT to be paid to Customs or reclaimed by you (Difference between boxes 3 and 4)	5	<input type="text"/>
	Total value of sales and all other outputs excluding any VAT. Include your box 8 figure	6	<input type="text"/> 00
	Total value of purchases and all other inputs excluding any VAT. Include your box 9 figure	7	<input type="text"/> 00
	Total value of all supplies of goods and related costs, excluding any VAT, to other EC Member States	8	<input type="text"/> 00
	Total value of all acquisitions of goods and related costs, excluding any VAT, from other EC Member States	9	<input type="text"/> 00
If you are enclosing a payment please tick this box. <input type="checkbox"/>	DECLARATION: You, or someone on your behalf, must sign below.		
	I, declare that the (Full name of signatory in BLOCK LETTERS) information given above is true and complete. Signature Date		
A false declaration can result in prosecution			
		<input type="text"/>	<input type="text"/>

Status: Point in time view as at 22/07/2004.

Changes to legislation: There are currently no known outstanding effects for the The Value Added Tax Regulations 1995, SCHEDULE 1. (See end of Document for details)

Regulations 23, 25(4)



**Final Value Added Tax
Return
For the period
to**

For Official Use

Registration number	Period
<input type="text"/>	9999

If your completed return and all the VAT payable are not received by the due date you will be in default and may be liable to a financial penalty

Due Date:

For official use D O R only	<input type="text"/>
-----------------------------------	----------------------

Before you fill in this form please read the notes on the back and the VAT leaflets "Filling in your VAT return" and "Flat rate scheme for small businesses", if you use that scheme. Fill in all boxes clearly in ink, and write 'none' where necessary. Don't put a dash or leave any box blank. If there are no pence write "00" in the pence column. Do not enter more than one amount in any box.

		£	p
For official use	VAT due in this period on sales and other outputs	1	
	VAT due in this period on acquisitions from other EC Member States	2	
	Total VAT due (the sum of boxes 1 and 2)	3	
	VAT reclaimed in this period on purchases and other inputs (including acquisitions from the EC)	4	
	Net VAT to be paid to Customs or reclaimed by you (Difference between boxes 3 and 4)	5	
	Total value of sales and all other outputs excluding any VAT. Include your box 8 figure	6	00
	Total value of purchases and all other inputs excluding any VAT. Include your box 9 figure	7	00
	Total value of all supplies of goods and related costs, excluding any VAT, to other EC Member States	8	00
	Total value of all acquisitions of goods and related costs, excluding any VAT, from other EC Member States	9	00

If you are enclosing a payment please tick this box. <input type="checkbox"/>	DECLARATION: You, or someone on your behalf, must sign below. I, declare that the (Full name of signatory in BLOCK LETTERS) information given above is true and complete. Signature Date
	A false declaration can result in prosecution

<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
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Regulation 5(1)

Application For VAT Registration

You should read the notes in the registration booklet "Should I be Registered for VAT?- Distance Selling" which will help you to answer these questions.
Please write clearly in black ink.

GD 3478(1100)

Do not detach

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9. Have you exercised the OPTION TO MAKE THE PLACE OF SUPPLY THE UK, although you have NOT exceeded the UK threshold? (see note 9)

Tick one box

NO Go to 10

YES and the option was exercised in on

Please enter the date of your first taxable supply in the UK

10. Do you intend to make distance sales of GOODS LIABLE TO EXCISE DUTY to the UK?

NO Go to 12

YES Please enter the estimated date of your first taxable supply in the UK.

11. (See note 11 - this is VERY IMPORTANT)

I am REQUIRED TO BE REGISTERED from

But I would LIKE TO BE REGISTERED from this earlier date Go to 13

12. Do you intend to exercise the OPTION TO MAKE THE PLACE OF SUPPLY of your distance sales the UK?

NO

YES Please enter the estimated date of your first taxable supply in the UK

The date from which I wish to be registered is

13. Please enter the ESTIMATED VALUE OF DISTANCE SALES you expect to make to the UK in the next 12 months

£

14. Declaration

I
(Full name in BLOCK LETTERS)

declare that all the entered details and information in any accompanying documents are correct and complete

Signature

Tick one box

- Proprietor Partner Director
- Company Secretary Authorised Official (including tax representative) Trustee

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Regulation 5(1)

Application For VAT Registration

You should read the notes in the registration booklet "Should I be Registered for VAT?: Acquisitions" which will help you to answer these questions.

Please write clearly in black ink.

CD 3438941 (1/1/92)

Do not detach

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9. Has the VALUE of your ACQUISITIONS from persons in other EC countries exceeded the registration limit at any time in the calendar year commencing 1st January 1993 or any subsequent calendar year?

Yes and I exceeded the threshold on

because the value of my acquisitions from 1st January amounted to £ Go to 10

No because the value of my acquisitions from 1st January amounted to £

If the answer is NO do you expect the value of ACQUISITIONS you will make in the next 30 days to exceed the registration limit?

Yes Go to 10

No Go to 11

10. If the answer to EITHER PART OF QUESTION 9 is YES, from what date MUST you be registered for VAT ? (See note 10) - This is VERY IMPORTANT

I am required to be registered from

But I would like to be registered from this earlier date Go to 12

11. I am NOT REQUIRED to be registered but I WISH to be registered from

12. Do you make taxable supplies in the UK?

YES Please enter the ESTIMATED VALUE OF TAXABLE SUPPLIES you have made in the last 12 months £

NO

13. Do you wish to request EXEMPTION from registration because all your acquisitions are ZERO-RATED?

Yes and my zero-rated acquisitions amount to £

No

14. Declaration

I
(Full Name in BLOCK LETTERS)

declare that all the entered details and information in any accompanying documents are correct and complete

Signature

Tick one box

Proprietor

Partner

Director

Company Secretary

Authorised Official

Trustee

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Value Added Tax
VAT Registration Notification

This notification form must only be filled in if you have to register because you are making relevant supplies in the UK and you have no place of business here. Section 7 of VAT Notice 700/4 *Registration for VAT: Non-established taxable persons* gives more information about this and will help you to answer the questions on the form.

Please answer all questions. Write clearly in black ink and use CAPITAL LETTERS

Name

- 1. Sole proprietors - please give your full name.
Partnerships - please give your trading name. If you do not have one, give the names of all partners (*partnerships must also complete form VAT 2*).
Corporate or unincorporated bodies - please give the name of the company, club, association etc.

--

- 2. Do you have a trading name? Yes No

Please give the trading name of the business.

--

Business address

- 3. Please give the address of your principal place of business.

Postcode	<input type="text"/>	Phone number	<input type="text"/>
		Fax number	<input type="text"/>

Tax representative

- 4. If you have appointed a tax representative to deal with your VAT matters in the UK please give details below.

Name			
Address			
	<input type="text"/>	Phone number	<input type="text"/>
Postcode	<input type="text"/>	Fax number	<input type="text"/>

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Status

5. What is the structure/legal status of the business? (Please tick)

Sole proprietor

Partnership

Corporate body

(Please give your company incorporation details)

Certificate number Date

Unincorporated body

Please give details

Business activities

6. What does your business do or intend to do? Tell us about your current or intended business activities.

Bank details

7. Please give your UK bank details or your tax representative's bank details.

Sort code <input type="text"/>	Account number <input type="text"/>
or	
No bank account (please tick) <input type="checkbox"/>	Girobank account number <input type="text"/>

Computer accounts

8. Is your accounting system computerised?

Yes (Give details below) <input type="checkbox"/>	No <input type="checkbox"/>
Computer type <input type="text"/>	
Software <input type="text"/>	Version <input type="text"/>

Relevant supplies

9. Have you made any relevant supplies yet? (Please tick one box)

<input type="checkbox"/>	Yes, I made my first relevant supply on	<input type="text"/>
<input type="checkbox"/>	No, but I expect to make my first relevant supply on	<input type="text"/>

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10. When did you first have reasonable grounds to believe that you were going to make relevant supplies?

Date

11. What value of relevant supplies do you expect to make in the next 12 months?

£

12. Do you make any other taxable supplies in the UK?

Yes No

If, "Yes", enter the estimated value of all taxable supplies, other than your relevant supplies, that you expect to make in the UK in the next 12 months.

£

Transfer of assets

13. Are you registering because VAT has been recovered by a predecessor in connection with the relevant supplies you have made, or intend to make?

Yes No

If "Yes", give the name(s) and address(es) of the person(s) who recovered VAT under either the Eighth or Thirteenth Directive refund schemes.

Exemption

14. Do you want exemption from registration because your relevant supplies are wholly zero-rated?

Yes No

If "Yes", give the expected value of your zero-rated supplies in the next 12 months.

Zero-rated relevant supplies

Other VAT registrations

15. Are you involved in, or have you (or any other partners or directors in your business) been involved in any other businesses in the past 5 years?

Yes No

If "Yes", give the names and VAT registration numbers of these businesses. (Continue on a separate sheet, if necessary)

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Declaration

16. I declare that the information given on this form and contained in any accompanying document is true and complete.

Signature	<input style="width: 95%;" type="text"/>	Date	<input style="width: 95%;" type="text"/>
Full name	<input style="width: 95%;" type="text"/>		

What is your position in the business? (Please tick)

Proprietor	<input type="checkbox"/>	Partner	<input type="checkbox"/>	Director	<input type="checkbox"/>
Company Secretary	<input type="checkbox"/>	Trustee	<input type="checkbox"/>	Other	<input type="checkbox"/>

If "Other", give details

Checklist

- Have you answered every question?
- Have you signed the form?
- Partnership? Remember to complete Form VAT 2
- Appointing a tax representative? Remember to complete Form VAT1TR

What to do next

When you have completed and signed the form, please send it to the VAT Registration Unit specified in VAT Notice 700/4 *Registration for VAT: Non-established taxable persons*. If you have any problems completing the form please contact the Registration Unit.

Usually we will register you and give you a VAT registration number within 15 working days of receiving your form, provided you have given all the necessary information.

For office use

Local office code and registration number		D M Y			Stagger	Status			
<input style="width: 95%;" type="text"/>		<input style="width: 95%;" type="text"/>			<input type="checkbox"/>	<input type="checkbox"/>			
Name	<input style="width: 95%;" type="text"/>				Trade classification	Taxable turnover			
Trade name	<input style="width: 95%;" type="text"/>				<input style="width: 95%;" type="text"/>	<input style="width: 95%;" type="text"/>			
Rept.	Vol	Oversize name address	Comp user	Group Div	Intg.	Overseas	Intg. EC	Value of Sales to EC	Value of Purchases from EC
<input type="checkbox"/>	<input type="checkbox"/>	<input style="width: 95%;" type="text"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input style="width: 95%;" type="text"/>	<input style="width: 95%;" type="text"/>
Registration	Obligatory/Voluntary	Exemption	Intending	Transfer of Regn No					
Approved - Initial/date									
Refused - Initial/date									
Form issued - Initial/date	VAT9/other	VAT8	Letter	Approval letter					

VAT1C

1B(March 2000)

»

Status: Point in time view as at 22/07/2004.

Changes to legislation: There are currently no known outstanding effects for the The Value Added Tax Regulations 1995, SCHEDULE 1. (See end of Document for details)

Regulation 191(1)

VAT 65A



Official authority to which the application is addressed

Is this your first application? If not, please give Reference No.

HM Customs and Excise
 VAT Overseas Repayments
 8th/13th Directive
 Custom House
 PO Box 34
 LONDONDERRY BT48 7AE
 Northern Ireland

[]

APPLICATION
 by a business person not
 established in the Community for
**REFUND OF
 VALUE ADDED TAX**
 (Please read the explanatory notes
 before filling in)

1	Forenames and surname or name of firm of applicant			
	House number and street name			
	Place, country and post code			
2	Nature of applicant's business			
3	Particulars of the Official Authority and tax/Business Registration No. in the country in which the applicant is established or has his/her domicile or normal place of residence			
4	Period to which the application refers	From	To	
		Month	Year	Month
5	Total amount of refund requested (In figures; see overleaf for itemised list)	£		
6	The applicant requests the refund of the amount shown in heading 5 in the manner described in heading 7			
7	Method of settlement requested (*)	Bank account <input type="checkbox"/>	Postal account <input type="checkbox"/>	
	Account number	IBAN number of financial body		
	Account in the name of	Name and address of the financial body		
8	No. of documents enclosed: Invoices: Import documents:			
9	The applicant hereby declares			
	(a) that the goods or services specified overleaf were used for the following business activities in the United Kingdom:			
	(b) that in the United Kingdom during the period covered by this application, he/she engaged in			
	<input type="checkbox"/>	(*) no supply of goods or services		
	<input type="checkbox"/>	(*) only the provision of services in respect of which tax is payable solely by the person to whom they are supplied		
	<input type="checkbox"/>	(*) only in the provision of certain exempted transport services ancillary thereto		
	(c) that the particulars given in this application are true			
				The applicant undertakes to pay back any monies wrongfully obtained

(*) Insert x in the appropriate box

(*) Insert x in the appropriate box

At: (Place) on: (Date) (Signature)

NOTE: Box 10 overleaf MUST be completed

VAT 65A

GD 0274/1/95(1/94)

Page 1. F 35CA (January 1994)

Status: Point in time view as at 22/07/2004.

Changes to legislation: There are currently no known outstanding effects for the The Value Added Tax Regulations 1995, SCHEDULE 1. (See end of Document for details)

- 2; Refunds of tax incurred may only be claimed subject to the rules of the United Kingdom. Brief details of supplies on which tax cannot be reclaimed are given in HM Customs and Excise Notice 729. Tax incurred on the following supplies also will not be refunded.
- (a) supplies of goods which have been or are about to be exported; and
 - (b) supplies to travel agents which are for the direct benefit of travellers. Under this scheme the term 'travel agent' includes tour operators or any person who purchases or re-supplies services to travellers

Number	Nature of goods or services	Name, VAT Registration No. (if known) and address of supplier of goods or services	Date and number of invoice or import document	Amount of tax refund applied for	FOR OFFICIAL USE ONLY
TOTAL B/F					
[Empty table rows with dotted lines]					
Page 3				TOTAL	

Status: Point in time view as at 22/07/2004.
Changes to legislation: There are currently no known outstanding effects for the The Value Added Tax Regulations 1995, SCHEDULE 1 . (See end of Document for details)

Regulation 191(1)(b)



Certificate of Status of Business Person

The undersigned
(Name and address of official authority)

certifies that
(Name of business person)

.....
(Nature of activity)

.....
(Address of the Establishment)

is a registered business person in
(Name of country)

*his registration number being

--	--	--	--	--	--	--	--	--	--

Date

Signature

Office date stamp

.....
(Name and grade)

*If the applicant does not have a registration number, the official authority should state the reason for this.

VAT 68A CD 3299/NS/D7/92)

F 86091)

Status: Point in time view as at 22/07/2004.

Changes to legislation: There are currently no known outstanding effects for the The Value Added Tax Regulations 1995, SCHEDULE 1. (See end of Document for details)

Regulation 201(a)



VAT refunds for DIY builders

1

Office date stamp

Serial number of claim

Part 1: Claim form

This Part must be filled in by the person making the claim. This form makes its own carbon copy. Please write in BLOCK LETTERS in black ball point pen. If you make a mistake, cross it out, insert the correct details above it and initial the alteration.

Your full name

Name of occupant of dwelling (if different)

If you are claiming on behalf of a charity:
Name of charity

Your status (ie Secretary, Director, duly authorised person)

1. Address of building you are claiming for

Postcode

2. Your address (if different)

Postcode

To which above address should the refund be sent? 1 2

Your daytime phone number

Date of completion

day	month	year
		19

Date of occupation or use

day	month	year
		19

Are you, or have you been, a director, sole proprietor or partner of any VAT registered business?

Yes No

If 'Yes', you must give the VAT registration number here

Is your claim only for goods used to 'fit out' or 'finish off' the building (paragraph 4 of the Notice)?

Yes No

Summary of Parts 3 and 4	£	p
Total amount of VAT claimed on Part 3 (Taken from 'VAT paid' column of Part 3)		
Total amount of VAT claimed on Part 4 (Taken from 'Calculated VAT' column of Part 4)		
Total amount claimed		

Declaration


I declare that:

- I have read Notice 719
- all the entered details and information on this form and any accompanying documents are correct
- no other claim has been, or will be, made for these supplies
- the building described in Part 2 is to be used solely for the purposes of the charity named above
- I am only reclaiming VAT which was correctly charged to me, and which I paid, on goods I imported or bought from a VAT registered supplier
- planning permission has been granted for the building described in Part 2.

Signature of person making the claim Date

WARNING There are heavy penalties for making false claims. If you are in any doubt please check with your local VAT office BEFORE you sign this form.

Status: Point in time view as at 22/07/2004.
Changes to legislation: There are currently no known outstanding effects for the The Value Added Tax Regulations 1995, SCHEDULE 1. (See end of Document for details)



**VAT refunds for
DIY builders**

2

Name of claimant (BLOCK LETTERS)

Part 2: Description of building and quantities of goods and materials used

Please write in black ink. If you make a mistake, cross it out and insert the correct details above it. The person making the claim must initial the alteration.

<p>Description of building Type eg bungalow, village hall</p> <div style="border: 1px solid black; height: 20px; width: 100%;"></div> <p>* Detached/semi-detached/teraced</p>	<p>Number of storeys (Count ground floor as one storey)</p> <p>Number of bedrooms</p> <p>Number of kitchens</p>	<p>Number of reception rooms</p> <p>Number of bathrooms/cloakrooms</p> <p>Ground floor area m²/m</p>	<p>Garages</p> <p>Built-in</p> <table border="0" style="width: 100%; font-size: small;"> <tr> <td style="border: 1px solid black; padding: 2px;">Number</td> <td style="border: 1px solid black; padding: 2px;">Single * double</td> <td style="border: 1px solid black; padding: 2px;">Total floor area m²/m</td> </tr> </table> <p>Detached</p> <table border="0" style="width: 100%; font-size: small;"> <tr> <td style="border: 1px solid black; padding: 2px;">Number</td> <td style="border: 1px solid black; padding: 2px;">Single * double</td> <td style="border: 1px solid black; padding: 2px;">Total floor area m²/m</td> </tr> </table>	Number	Single * double	Total floor area m²/m	Number	Single * double	Total floor area m²/m
Number	Single * double	Total floor area m²/m							
Number	Single * double	Total floor area m²/m							
<p>Quantities of materials used. If your claim is only for goods used to 'fit out' or 'finish off' the building, you need only list those goods you are claiming for. If not, you must list all materials used, even those you are not claiming for. Please fill in the quantities in the units specified. The conversion table on the folder will help you to do this.</p>									

Item	Quantity		Unit
	Amount	Unit	
Cement			Tonnes
Sand			*Tonnes/m ³
Aggregate			*Tonnes/m ³
Lime			Tonnes
Facing Bricks			Number
Common Bricks			Number
Stocks/engineering etc bricks			Number
Windows			Number
Glazing			m ²
Roofing tiles			Number
Roofing felt			Rolls
Floor tiles			Number
Copper tubing			Metres
Plaster			Tonnes
Partition blocks			Number
Plaster-board			m ²
Timber-carassing			m ³
Timber-Joinery			m ³
Timber-tongued and grooved flooring			m ²
Staircase and handrail			Number
External doors			Number
Internal doors			Number

Item	Quantity		Unit
	Amount	Unit	
Paint - undercoating			Litres
Paint - emulsion			Litres
Paint - woodprimer			Litres
Paint - finishing coat			Litres
Cold water storage tank			Number
Copper cylinder			Number
Ironmongery for doors			Number
Sink, drainer and taps			Number
Washbasin and taps			Number
WC Suite			Number
Bath and taps			Number
Heating			Number of radiators
Brief description			
Type of heater unit			
Kitchen units (bought-in cupboards, worktops, etc). Please give number, type and dimensions of each.			
Electrical Installation			
Number of power points	Amount and type of cable used		
Number of lighting points			
Number of switches	Number of fuse boxes		

*Delete as appropriate. If you have used items not listed in this part, please list them overleaf with the quantity of each. If you need more space please continue on a separate piece of paper

Status: Point in time view as at 22/07/2004.

Changes to legislation: There are currently no known outstanding effects for the The Value Added Tax Regulations 1995, SCHEDULE 1 . (See end of Document for details)



VAT refunds for DIY builders

3

Name of claimant (BLOCK LETTERS)

Part 3: Goods and materials claimed for where the Invoices show VAT separately


When you fill in this part, you must:

- list those goods and materials for which you have invoices or import documents **showing VAT separately**. Don't include items not eligible for the scheme - the list at the back of Notice 719 gives examples of items not covered by the scheme
- either **subtract** the amount of any credit note you receive from the relevant invoice entry or **put it in red** in the list and subtract it from the total
- attach all the original invoices and import documents to this Part in the same order as they are listed.

Please write in black ink, cross out any mistakes you make and insert the correct details above them. The person making the claim must initial the alterations.

1 Brief description of goods	2 Quantity of goods	3 Supplier's name	4 Invoice number or other reference number (eg Customs entry no.)	5 VAT paid £	p
Total					

Status: Point in time view as at 22/07/2004.
Changes to legislation: There are currently no known outstanding effects for the The Value Added Tax Regulations 1995, SCHEDULE 1. (See end of Document for details)



**VAT refunds for
DIY builders**

4

Name of claimant (BLOCK LETTERS)

Part 4: Goods and materials claimed for where invoices don't show VAT separately

When you fill in this Part, you must:

- list those goods and materials for which you were charged VAT but the suppliers' invoices do not show it separately. Don't include items not eligible for the scheme - the list at the back of Notice 719 gives examples of items not covered by the scheme
- either subtract the amount of any credit note you receive from the relevant invoice entry or put it in red in the list and subtract it from the total

• attach all the original invoices to this Part in the same order as they are listed
- work out the VAT in column 6 as set out on the folder.

Please write in black ink, cross out any mistakes you make and insert the correct details above them. The person making the claim must initial the alterations.

1 Brief description of goods	2 Quantity of goods	3 Supplier's name	4 Invoice number	5 Total amount paid for goods £ p	6 Calculated VAT £ p
Total brought forward from previous sheet					
Totals					

VAT 431 (Pt 4)

FD204 (January 1992)

Carry forward overleaf

Status: Point in time view as at 22/07/2004.
Changes to legislation: There are currently no known outstanding effects for the The Value Added Tax Regulations 1995, SCHEDULE 1. (See end of Document for details)

Regulation 22(6), 23



New Means of Transport

for removal from the UK to another Member State of the European Community
 See notes overleaf before completing - Write in BLOCK LETTERS only

Ref

For the purchaser to complete

Surname (Mr./Mrs./Miss)

Forename(s)

Full Address in the UK

.....

Telephone

Permanent/Temporary (Delete as applicable)

Full address in Member State of Destination

.....

Telephone

Permanent/Temporary (Delete as applicable)

Are you: a UK Resident? an overseas visitor?

(Tick one box)

Are you a serving member of HM Forces? YES/NO

Member State of destination of the New Means of Transport in which VAT will be paid

I Declare that:

- I have read notice 728 and the notes overleaf;
- I intend to remove the New Means of Transport described above from the UK to the Member State of destination within 2 months of the date of supply;
- I intend to notify the fiscal authority in that Member State and pay any tax due;
- I understand that if I fail to remove the New Means of Transport described above within 2 months of the date of supply it will become liable to forfeiture and UK taxes will become due;
- The information I have given above is correct.

Signature

Date

VAT 411 (Customs Copy)

For the Supplier to complete

Full Name and Address

.....

Telephone

Vat Registration No. GB

Details of the New Means of Transport

Motorised Land Vehicle Ship Aircraft

(Tick as applicable)

Make	
Model	
Colour	
Registration No.	
Engine No.	
Chassis/Hull/Airframe No.	
Invoice No. and date	
Date of Supply	
Purchase Price	
VAT not paid at time of supply	

I Declare That:

- the New Means of Transport described above complies with the definition given in notice 725 about VAT and the Single Market
- the information given above is correct

Signature

Date

Status: Proprietor/Partner/Director/Company Secretary/Authorised Person (Delete as applicable)

Status: Point in time view as at 22/07/2004.
Changes to legislation: There are currently no known outstanding effects for the The Value Added Tax Regulations 1995, SCHEDULE 1. (See end of Document for details)

Regulation 178(1)(a)

VAT 65



Competent authority to which the application is addressed

Is this your first application? If not, please give Reference No.

[]

APPLICATION
 by a business person
 established in the Community for
REFUND OF
VALUE ADDED TAX
 (Please read the explanatory notes
 before filling in)

1	Forenames and surname or name of firm of applicant			
	House number and street name			
	Post, country and post code			
2	Nature of applicant's business			
3	Particulars of the Office, Authority and tax/business Registration No. in the country in which the applicant is established or has his/her domicile or normal place of residence			
4	Period to which the application refers	Month	From Year	To Year
5	Total amount of refund requested (in figures) (see overleaf for permitted tax)	£		
6	The applicant requests the refund of the amount shown in heading 5 in the manner described in heading 7			
7	Method of settlement requested (*)		Bank account <input type="checkbox"/>	Postal account <input type="checkbox"/>
	Account number	Code number of financial body		
	Account in the name of			
	Name and address of the financial body			
8	No. of documents enclosed: Invoices Import documents			
9	The applicant hereby declares			
	(a) that the goods or services specified overleaf were used for the following business activities in the United Kingdom			
	(b) that in the United Kingdom during the period covered by this application, he/she engaged in			
	<input type="checkbox"/> (i) no supply of goods or services <input type="checkbox"/> (ii) only the provision of services in respect of which tax is payable solely by the person to whom they are supplied <input type="checkbox"/> (iii) only in the provision of certain exempted transport services ancillary thereto			
(c) that the particulars given in this application are true				
The applicant undertakes to pay back any moneys wrongfully obtained				

(*) Insert x in the appropriate box

(*) Insert x in the appropriate box

At: (Place) on (Date) (Signature)

NOTE: Box 10 overleaf **MUST** be completed

Status: Point in time view as at 22/07/2004.

Changes to legislation: There are currently no known outstanding effects for the The Value Added Tax Regulations 1995, SCHEDULE 1 . (See end of Document for details)

Regulation 178(1)(b)(i)



Certificate of Status of Taxable Person

The undersigned

.....
(Name of local VAT office)

Name of taxable person
Address
.....
.....
Nature of activity

is a taxable person for the purposes of Value Added Tax, whose Registration number is

--	--	--	--	--	--	--	--	--	--

Date

Office stamp

Signature

.....
(Name and grade)

VAT 66

CD 10 7/NB(079)

F 50371

[^{F6}Form No. 17 CERTIFICATE REQUIRED TO SECURE RELIEF FROM VAT ON PURCHASED OR ACQUIRED GOODS INTENDED TO BE PLACED IN A FISCAL WAREHOUSING REGIME

Status: Point in time view as at 22/07/2004.
Changes to legislation: There are currently no known outstanding effects for the The Value Added Tax Regulations 1995, SCHEDULE 1 . (See end of Document for details)

Information to be indicated:

I	(full name)
	(status in company)
of	(name and address of company)

declare that (name of company) intends to enter to the fiscal warehousing regime at the fiscal warehouse shown below on (date), or within... days commencing today, the goods indicated below:

- name and address of fiscal warehouse
- authorisation number of the fiscal warehousekeeper
- description of goods
- quantity of goods

I certify that the supply of goods/acquisition is eligible to be relieved from VAT under the following provisions of the Value Added Tax Act 1994 *[delete as appropriate]*:

sections 18B(2)(d)/18B(3) (purchases) *or* sections 18B(1)(d)/18B(3) (acquisitions).

(signature)

(date)

NOTE: You should be aware that there are severe penalties for making a false declaration. If there is any doubt about the eligibility of the goods or about the fiscal warehouse to which they are being sent you should consult the local Customs and Excise office before preparing the certificate. *A copy of the certificate should be filed with the supplier's invoice and a copy of the delivery note.*

Textual Amendments

F6 Sch. 1 Forms 17, 18 Form added (28.4.1996) by [The Value Added Tax \(Amendment\) \(No. 3\) Regulations 1996 \(S.I. 1996/1250\)](#), regs. 1(1)(2), 15, **Sch. 1**

Form No. 18 CERTIFICATE REQUIRED TO SECURE ZERO-RATING OF SERVICES (OTHER THAN THE SUPPLY OF WAREHOUSING) PERFORMED IN A FISCAL OR OTHER WAREHOUSE

Information to be indicated:

I	(full name)
	(status in company)
of	(name and address of company)

declare that the goods shown below are subject to a fiscal or other warehousing regime at the place indicated below:

- description of goods
- quantity of goods
- warehouse stock number
- name and address of fiscal or other warehouse
- authorisation number of the relevant warehousekeeper/warehouse

and that the following services are to be performed on the goods in the fiscal or other warehouse:

I certify that the supply of services is eligible to be zero-rated for VAT purposes under section 18C(1) of the Value Added Tax Act 1994.

(signature)

(date)

NOTE: You should be aware that there are severe penalties for making a false declaration. If there is any doubt about a supply being entitled to zero-rating you should consult the local Customs and Excise office before signing and giving the certificate. A copy of the certificate should be filed with the supplier's invoice which should refer to section 18C(1) of the Value Added Tax Act 1994 to be eligible for zero-rating.]

Textual Amendments

F6 Sch. 1 Forms 17, 18 Form added (28.4.1996) by [The Value Added Tax \(Amendment\) \(No. 3\) Regulations 1996 \(S.I. 1996/1250\)](#), regs. 1(1)(2), 15, **Sch. 1**

Status:

Point in time view as at 22/07/2004.

Changes to legislation:

There are currently no known outstanding effects for the The Value Added Tax Regulations 1995, SCHEDULE 1 .