SCHEDULE 1

Regulation 5(1)

Commencement Information

I1 Sch. 1 in force at 20.10.1995, see reg. 1

Application For VAT Registration

You should read the notes in the registration leaflet 'Should I be Registered for VAT?' which will help you to answer these questions. Failure to answer questions correctly may result in a delay in your registration number being advised to you. Please write clearly in black ink. VAT 1 Do not detach

1. Enter your FULL NAME. Write in BLOCK LETTERS and leave a space between words

		- <u> </u>		
Liitan	•		•	'

2. Enter your TRADING NAME if it is different from the name entered at 1

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3. Enter the address of your PRINCIPAL PLACE OF BUSINESS

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	1					
Phone No.			┝─ ┖ ╶└╶┊╶└─ ╵			
[]			\mathbf{H}		┝┻┻┻╋	<u> </u>
4. Describe your main BUSINESS A		ul L pleasé <i>l</i> é	as note 41	Postc	ode (
4. Destable you main booincoo A		onn biegse (s	66 HC(8 H)			
				·		
5. Who is the BUSINESS OWNED by	v ? tsee note !	and tick ON	BOX only1	·····		
5. 7110 IS (10 BOOIT 200 01. 148 5)	, . (
Sole Proprietor						
or Partnership If pa	intriership plea	se ensure you	ALSC compl	ete form VAT	2	
or Limited Company Pleas	se enter defail:	s from Compa	ny Incorporati	ion Cerlificate	bełow.	
Certificate Nur	mbar			te of certificat	a	
		· · ·]	tte of certificat		<u> i </u>
		ſ ······				
or Other Pe	ase give delai k	5				
6. Was your BUSINESS TRANSFER	BED to you o	r vour comoar	w as a GOIN	CONCERN	,	
		i yaan oompa	., us u ciont			
YES NO II'	YES, enter the	date of trans	ier		and also	
Enter the PREVIOUS OWNER'S nam						
Enter the PREVIOUS OWNER'S hart						
and VAT REGISTRATION NUMBER			!			
	1 2,	<u> </u>				7
Do you want to RETAIN the VAT NUI	MBER of the p	vievious owne	17	YES		(see note 6)
If you tick YES then both you and the	previous own	er MUST also	complete for	n VAT 68		
7. Enter EITHER your BANK SORT (XODE and	ACCOUNTI	UMBER	or your GIBC		UNTINUMBER
The Ender Former your contact each of						
 Do you use a COMPUTER FOR A 	CCOUNTING	7 (see note 8	and tick one b	ox only) 🦄	(ES N	° 🛄

9. Please read NOTE 9 in the leaflet before you answer this question
Have you made any TAXABLE SUPPLIES yet?
YES A MADE my first supply on Go to 10
NO But I INTEND TO start on
You must enclose EVIDENCE to support your application. Go to 11
10. Has the VALUE of your business's TAXABLE SUPPLIES in the last 12 months OR LESS exceeded the registration Ilmit? (see note 10)
YES Go to 12 NO Go to 11
11. Will the TOTAL value of TAXABLE SUPPLIES which you will make in the NEXT 30 DAYS exceed the registration limit ?
YES Go to 12 NO Go to 13
12. If the answer to EITHER QUESTION 10 or 11 is YES from what date MUST you be REGISTERED for VAT?
(see note 12 - this is VERY IMPORTANT)
I am REQUIRED to be registered from
But I would LIKE TO BE registered from this earlier date
13. I am NOT REQUIRED to be registered but I WISH TO BE registered from
14. Please enter the ESTIMATED VALUE of TAXABLE SUPPLIES you expect to make in the next 12 months
15. What VALUE of GOODS are you likely to SELL 2 BUY 2 BUY 2 Logare blank if NIL)
16. Do you wish to request EXEMPTION from registration because all your supplies are ZERO RATED?
YES and my ZERO RATED supplies amount to 2 in the next 12 months
NO
17. Do you expect to be ENTITLED to REGULAR REPAYMENTS of VAT? (Tick one box) YES NO
18. Are there any other VAT REGISTRATIONS in which you are involved (see note 18 if in doubt)?
YES If YES please enter the registration (Please continue on numbers in the boxes provided.
NO pecessary)
19. YOU MUST COMPLETE THE FOLLOWING DECLARATION IN FULL (see note 19)
I
Signature Dale
Tick ONE box Proprietor Director Trustee
Panner Company Secretary Authorised Official

Form No. 2

1

ALLE LAR Details		HM Gustons and Loss on A
aither a	ach partner should complete one of the section lease start at the beginning of each I ne and lea bace between words. lease use BLOCK CAPITALS and write clearly	VE 2 Registration No. (where known)
Full name	· · · · · · · · · · · · · · · · · · ·	
Home address		
Home (elephone		* - · · · · · · · · · · · · · · · · · ·
Signature	Date	
Partner details		
Full name	·	
Home address		· · · · · · · · · · · · · · · · · · ·
Home telephone		
Signature	Date	Postcode
Partner details		
Full name	<u> </u>	· · · · · · · · · · · · · · · · · · ·
Home address		· · · · · · · · · · · · · · · · · · ·
Home telephone		· · · · · · · · · · · · · · · · · · ·
Signature	Date	Postcode [
Partner details		
Full name	······································	······································
Home address		
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	Partner details		والمحادثة والمتركة بالتنز والبراج والمترا
5	Full name		
	Home address	╷╶╴╴	
	Home telephone		
	Signature		Postcode
	Partner details		
6	Full name	╷╶╴╷ ┶─┴ <u>╼</u> ┤╴┛ _{╍┙} ┦╴┟╶┼╵╼┞─┼╖┶─┴ <u>╼</u> ┷╼	
	Home address		·····
	Hame telephone	····	* * * * * * * * * * * * * * * * * * * *
	L		
L	Signature	Date	Postcode
7	Partner details		
,	Full name		
	Home address		
	Home telephone		********
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	Signature	Date	Postcode
	Partner details		
8	Full name	• • • • • • • • • • • • • • • • • • •	· · · · · · · · · · · · · · · · · · ·
	Home address	• • • • • • • • • • • • • • • • • • •	· · · · · · · · · · · · · · · · · · ·
	Home telephone	······································	┶╍┹─┸╍┽╶┶╍ [┥] ╼ [┝] ┉┶╍┼╌ [╏] ┍╌┼╺┽╴┶╍┼╴┶╌┼╴╵╴╵
	Signature	Date	Postcode
	Partner details		
9	Full name		
	Home address		<u></u>
	Home telephone	····	·····
ļ	Signature	Date	Postcode
CD 3053/R	SP(0724)		

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

N/We took over a business as a going concern on	*I/we transferred a business as a going concern on
date 19	date - 19
from (nume of previous owner)	to
*i/we *enciose/itave already returned Form VAT 1, and apply to use the previous owner's VAT registration number	From that date *I and/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 agree:	If the application is granted *1/we declare that:
 to send "my/our first VAT return to Contonn and Excise with all the VAT due for the whole period covered by the return. 	 the new owner will be easilied to neclaim any loper tax which "I/we could have rectained if the registration number had not been transferred
 to send in any returns due from but not reade by the previous owner 	• any payment made by Customs and Excise to the new owner will satisfy any right *D we have to that money
 to pay Customs and Excise, when asked, any VAT due on supplies marke by the provious owner before the business was transferred - including any VAT on stocks and assess kept by the previous owner. 	*I/we have retained stocks and assets valued at 2 . including VA1: I/we can be contacted at itse following address after the date
 that any return made in the previous owner's name for a period after the transfer date will be regarded as made by "metos 	of fransfer.
 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)	Signature(s)
(Fropretor, partners, director, company secretary)	(Proprietor, partners, director, company secretary, executor)
date L9	date 19
relation on neccasary	*delete us necessary

	Value Added Tax Return For the period to	For Official Use
d (KHKK) S HM Customs and Excise		Registration number Period
[You could be liable to a financial penalty if your completed return and all the VAT payable are not received by the due date.
		Due date:
		For official use D O R oniy

Before you fill in this form please read the notes on the back and the VAT leaflet "Filling in your VAT return". Fillin 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.

	£	_ р_
For official use	VAT due in this period on sales and other outputs	
	VAT due in this period on acquisitions from other 2 EC Member States	
	Total VAT due (the sum of boxes 1 and 2) 3	ļ
	VAT recaimed in this period on purchases and other inputs 4 (including acquisitions from the EC)	İ
	Net VAL to be usid to Gustome or rectained by you 5 (Difference between boxes 3 and 4)	!
	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	00
	Total value of al: supplies of goods and related services, excluding any VAT, to other EC Member States	00
	Total value of all acquisitions of goods and related services, g excluding any VAT, from other EC Mamber States	i od
	Retail schemes. If you have used any of the schemes in the period covered by this return, enter the relevant letter(s) in this box.	
	DECLARATION: You, or someone on your behalf, must sign below.	
you are enclosing payment please tick this box.	I,declare that the (Full name of signatory in BLOOK LETTERS)	
	information given above is true and complete.	
	Signature	
L	PCu(April 1966)	
AT 100 (5.0)		

VAT 100 (5.0)

			Regulations 23, 25
灜	Final Value Added Tax Return For the period to	For Official Use	
HM Customs and Excise		Registration number	Period
			9999
		You could be liable to a fin if your completed return an payable are not received by	d all the VAT
		Due date:	
L		For official use D O R	
		only	
Before vou fill	in this form please read the notes on the back and the	VAT leaflet "Flijing in your VAT return". Fi	ll in all boxes clearly
In Ink, and write	roone' where necessary. Don't put a dash or leave any b ore than one amount in any box.	ox blank. If there are no pence write "00" in the \mathfrak{L}	e pence column. p

For olficial use					
	VAT due in this pared on sales and other outputs				
	VAT OUe in this period on acquisitions from other 2 EC Member States				
	Total VAT due (the sum of boxes 1 and 2) 3				
	VAT reclaimed in this period on purchases and other inputs 4 (including acquisitions from the EC)				
	Net VAT where wis to Custome or replaimed by value 5 (Oktorence between boxes 3 and 4)				
	Total value of sales and all other outputs excluding 6 00				
	Total value of purchases and all other inputs excluding 7				
	Total value of all supplies of goods and related services. 8 00 00 000 000 000 000 000 000 000 00				
	Total value of all acquisitions of goods and related services, 9 00 excluding any VAT, from other EC Member States				
	Retail schemes. If you have used any of the schemes in the period covered by this return, enter the relevant letter(s) in this box.				
	DECLARATION: You, or someone on your behalf, must sign below.				
f you are enclosing a payment please	I,declare that the (Full name of signatory in BLOOK LETTERS)				
tick this box.	information given above is true and complete.				
	Signature				
	PGU(April 1996)				
/AT 193					

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Regulation 5(1)

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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 lnk.

GD (3428(1182)

Do not detach

1. Enter the INAME of the PERSON MAKING DISTANCE SALES to the UK. Write in BLOCK LETTERS and leave a space between words

2. Enter the NAME of the UK TAX REPRESENTATIVE (see note 2)
 3. Please give the ADDRESS of the TAX REPRESENTATIVE or the ADDRESS of the PERSON NAMED at box 1 if a tax representative has not been appointed
Phone No.
4. Describe your main_BUSINESS ACTIVITY IN FULL please (See note 4)
······································
5. Who is the BUSINESS OWNED by ? (See Note 5 and tick ONE BOX only)
Sole Proprietor
or Partnership Please ensure you ALSO complete form VAT 2.
or Limited Company
or Other Please give details
6. Enter your UK BANK DETAILS or YOUR TAX REPRESENTATIVE'S BANK DETAILS: (See Note 6)
Bank Sort Code Account Number Giro Bank Account Number
7. Do you use a COMPUTER FOR ACCOUNTING ? (See Note 7 and tick one box only) YES NO
8. Has the value of your DISTANCE SALES to customers in the UK exceeded the UK distance selling threshold at any time in the calendar year commencing 1st January 1993 or any subsequent calendar year?
YES and I exceeded the threshold on Go to 10
NO Go to 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									
NC Go to 10 EC Country YES and the option was exercised in on r									
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)									
But I would LIKE TO BE REGISTERED from this earlier date									
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									
(Full name in BLOCK LETTERS)									
declare that all the entered details and information in any accompanying documents are correct and complete									
Signalure									
Tick an o box									
Proprietor Partner Director									
Company Secretary Authorised Official Trustee (including tax representative)									

Form No. 7

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 3430/41 (11/92)

Do not detach

1. Enter your FULL NAME. Write in BLOCK LETTERS and leave a space between words

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╶╩┷┟╽╶╢╼╨╼┷╬╌┷╋╢╴╋╋┥╸┝┝┝┝

2. Enter your TRADING NAME if it is different from the name entered at 1

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		in the stand of the			
		•	:	-	· .
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3. Enter the address of your PRINCIPAL PLACE OF BUS/NESS

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Phone No.		1	1	I	1		1	I	ι	1	;	1	1	1		ł		1	1	1	1	1	1	1		-	1	1	1	1	
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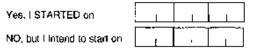
4. Describe your main. BUSINESS ACTIVITY IN FULL please (See note 4).

······································

5. Who is the BUSINESS OWNED by ? (See Note 5 and tick ONE BOX only)

or Partnership Please ensure you ALSO complete form VAT 2.	
or Limited Company Please enter details from Company Incorporation Certificate below.	
Number Date	
or Other]
6. Enter EITHER your BANK SORT CODE and ACCOUNT NUMBER or your GIROBANK ACCOUNT NUMBER	ĒR
]
7. Do you use a COMPUTER FOR ACCOUNTING ? (See Note 7 and tick one box only) YES NO	_

8. Have you made any ACQUISITIONS yet ? (This is IMPORTANT - please see Note 8)



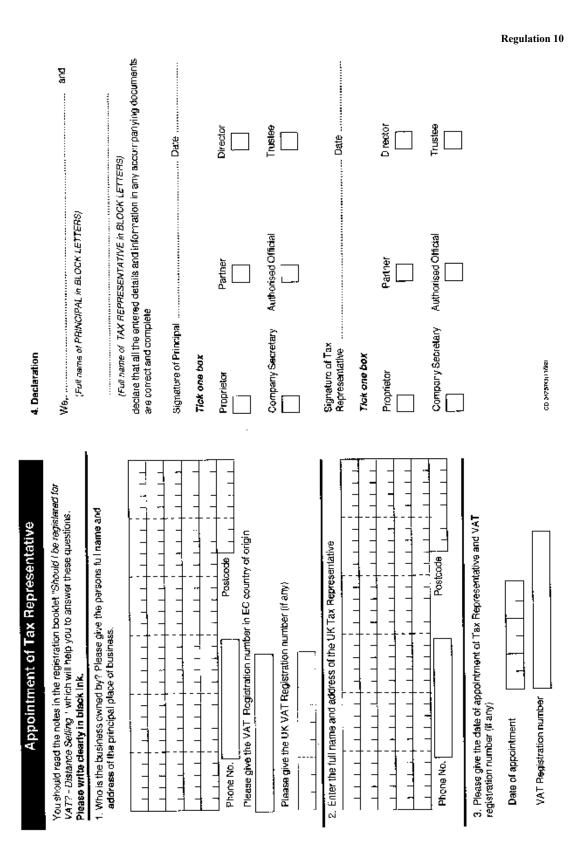
(Enter date you made your first acquisition)

(Enter the date on which you expect to start)

VAT 1B 00.2450/045(10/32)

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

Yes and I exceeded the threshold on I I I
because the value of my acquisitions from 1st January amounted to 2 Go to 10
No because the value of my acquisitions from 1st January amounted to 2
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
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 2
13 Do you wish to request EXEMPTION from registration because all your acquisitions are ZERO-RATED?
Yes and my zero-rated acquisitions amount to £
Νο
14. Declaration
(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
GD 348027V2(1):22;
Form No. 8



16

Regulation	191(1)
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VAT 65A

	isit Aef	is your test application? If not, please glue anance No.
Official adhority to which the application is addressed	г‴ L	HM Customs and Excise APPLICATION VAT Overseas Repayments APPLICATION 8thv13th Directive by a business person not Custom House established in the Community for PO Box 34 REFUND OF LONDONDERBY BT49 7AE VALUE ADDED TAX Northern Ireland Effore filling in)
		Foremann-as ánd sum áine ornaine öffinn of applicaint
	1	House number and safes frame
	2	Nature of applicant a business Particulars of the Official Authority and tearbusiness Registeration No. In the country in which the applicant is setablished or has hearher domicile or
	3	normal place of residence
	4	Period in which the application refers
	6	Total amount of retund requested (in Hyunes; (see overlea) for itemised tar)
	ę	The applicant requests the refund of the amount shown in heading 5 in the manner described in heading 7
(*) Insert x		Method of salbement requested (*) Benk Postal account account
appropriate box	1	Accourt rumber Coste number of financial body
DOX		
	7	
		Name and address of the imancial body
	ð	
	Ļ	No. of documents enclosed, handling and an annual in two loss and an annual and a second second documents and a The applicant hereby declares
		(a) that the goods or services specified overleat were used for the following business activities in the United Kingdom
	ļ	
	9	(b) that in the United Kingdom during the period covered by this application, he/she engaged in 1
		(*) no subply of goods or services
(*) inseri x		(*) only the provision of services in respect of which tax is payable solely by the person to whom they are supplied
in the appropriate box		(*) only in the provision of certain exempted transport services ancillary thereto
		(c) that the carticulars given in this application are true
		The applicant undertakes to pay back any monies wrongfully obtained
		At
		NOTE: Box 10 overleaf MUST be completed
VAT 65A	¢	Page 1, [7554[January 1994]

Statement Itemising VAT amounts relating to the period covered by this application Element sheet, headed with your business contraction

Ee nuction sheet, headed with your business registration number, endorsed "Box 10" and attach it firmly to the application form.

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
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	·····				
• • • •			••••		
		······································			
		······			
					·····
		Dar	сл г је 2.		



Refunds of fax indured 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 723. Tax incurred on the following supplies dou will not be refunded. (a) supplies of goods which have been or are about to be exported; and (a) supplies to have agents which have been or are about to be exported; and (b) supplies to have agents which the for the direct benefit of fravewers. Under this other to the term "travel agent "includes rour 2;

1	suggries to travel agents which are for the direct benefit of travelers. Under this scheme the term "travel agent "ine uper teu
	operators or any person who purchases or re-supplies services to travellers

Number	Nature of goods or services	Name, VAT Registration Nc. (d known) and address of supplier of goods or services	Date and number of invoice or import document	Amount of lax refund applied for	FOR OFFICIAL USE ONLY
				TOTAL B/F	
			·		
		······································			
	· · · · · ····· · · · · · · · · · · ·				
L			TOTAL		
		Pa	263 IOTAL		

CD 0074/2/NB(01/84)

	Regulation 191(1)(b)
	tificate of Status of Business Person
The undersigned	me and address of official authority)
certifies that	(Name of business person)
	(Nature of activity)
	(Address of the Establishment) in
*his registration number being	
Date	Signature
Office date starep	(Name and grade)
state the reason for this.	a registration number, the official authority should
VAT 66A CC 32954N5(07/92)	F 8609i)

Regulation 201(a)

<u>d</u>	VAT refunds for	Office date stamp
	DIY builders	
H M Castome and Excise	Serial nember et dialm	
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 pon. If you make a mistake, cross it out, insert the correct cetails above it and initial the alteration.

Yaur tuli game	Name of occupant of dwolling (if different)
Il you are claiming on behalf of a charity:	
Name of charity	Your status (ie Secretary, Director, duly authorised person)
1. Addreas of building you are clarming for	2. Your address (if different)
i I I'' Postcode	Postcode .ii.
To which above address should the refund be sent? $\fbox{1}$	2 :
Your doytime phone number Date of completion	Date of cocupation or use
dey monit	n year day month year 19 19 19
	"Yes", you must give the VAT
Is your claim only for goods used to 'fli out' or 'finish off' the building (paragraph 4 of the Notice)?	Yee Nu
Summary of Parts 3 and 4	£ p
Total amount of VAT claimed on Part 3 (Taken from 'VAT paid' colu-	nn of Part 3)
Total amount of VAT claimed on Part 4 (Taken from Calculated VAT	F solumin of Part 4)
Tola	ll amount claimed
Deciaration	
I declare that:	
I have read Nokce /18	 Lam only requiring VAT which was correctly charged to me.
 all the entered details and information on this form and any accompanying documents are correct 	and which I paid, on goods / imported or bought from a VAT registered supplier
 no other claim has been, or will be, made for these supplies 	 planning permission has been granted for the building described in Part 2.
 'the truilding described in Part 2 is to be used solely for the purposes of the charity named above 	
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,

VAT 431 (Pt 1) LVO copy

sage ?

PERMA December (990)

Weitere Millor Application

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Name	of claimant (BLOCK LETTERS)

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

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 When you fill in this part, y Ilst those goods and mat which you have invoices documents showing VA separately. Don't includ not eligible for the schem at the back of Notice 719 examples of items not co the scheme 	terials for a or import T e items te - the list } gives	 either subtract the amo credit note you receive relevant invoice entry o in the list and subtract i attach all the original in import documents to thi same order as they are 	from the out in put it in red inset t from the total their clair voices and is Part in the	any mistake art the corre m.The perso	black ink, cross is you make and of details above on making the il the alterations.
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VAT 431 (Pt 3)

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Carry forward overlea!

SER. VAT refunds for	Name of claimant (BLOCK LETTERS)
DIY builders	
/麻柳、	
Part 4: Goods and materials claimed for	
where invoices don't show VAT sepa	
- Antere in the local dates and the second	

When you fill in this Part, you must:

- tist 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 involces 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 cetails above them. The person making the claim must initial the alterations.

Brief description of goods	2 Quantity of goods	3 Supplier's name	4 Invoice number	5 Total amount paid for goods £ p	6 Calcula:ed VAT Ω p
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VAT 431 (Pt 4)

PDD04 (January 1990)

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Regulation 21, 22, 23

		Value Added Tax EC Sales list For the period To					
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New Means of Transport Period for removal from the UK to another Member State of the European Community Series overlad belore completing - Write in BLOCK LETERs only For the purchaser to complete Full Address in the UK Full Address in the UK Full Address in the UK Full Address in Member State of Destination Full address in Member State of State of Destination Full Address Clocker Full address in Member State of Destination Full address in Member State of Destination The you a security (Delate as applicable) Revere State of destination of the New		Regulation 22(6),	
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Regulation 204(c)

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Value Added Tax Flat Rate Scheme for Agriculture Application for Certification

Notes to help you complete this form are on the reverse. Please read them carefully
Please enter your FULL NAME in BLOCK LETTERS. (See note 1)

2.	Please enter the ADDRESS of your BUSINESS. (See note 2)

Tel No.	
	_

3. Please describe your BUSINESS INCLUDING NON-FARMING ACTIVITIES. (See note 3)

4,	Please enter the ESTIMATED VALUE of	FAGRICULTURAL	SUPPLI	ES

you expect to make in the next 12 months. (see note 4)

5.	Please enter the ESTIMATED VALUE of SUPPLIES OF OTHER GOODS an	d
	SERVICES which you expect to make in the next 12 months. (See note 5)	

Please enter the DATE from which you wish your CERTIFICATE
 TO BE EFFECTIVE. (See note 6)

 Please enter your VAT REGISTRATION NUMBER. Write "NONE" if you are not registered for VAT. (See note 7)

8. You must complete the following declaration :

Inter your NETREMENT ALLOCK LETTERS) declare that the information entered on this form is true and complete. 1 apply for cancellation of the VAT registration shown at box 7 above.					
Signature		,	Date		
Tick one box	Proprietor Partner	Director Company Secretary	Trustee AuthorIsed Official		
Initials and Date		For Official Use			
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	5	Total amount of reform requested (in ligures) [see overlas' for lenised1st)		; I	1 : .		
	6	The applicant requests the refund of the amount shown in heading B in the manner describer in he	-		·		
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	8	No. of docurrents enclosed	nport sacu	narts			
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	9	(a) the unite United Kingdom outing the period covered by this application, held	she enga	ged a			İ
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		(c) that the pationiars given in this application are pro-					İ
		The asplicant undertakes to pay back any innnies wrongfully optained					
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		NOTE: Box "Dioverleaf MUST he completed					
		Page I.				;	
VAT 65		PG_1(7ay 1995)					

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10 Statement hemising VAT amounts relating to the period covered by this application

Each document submitted should be consecutively numbered starting with 1. The number should be inserted in the top right-hand corner of the face of the document. Enter details across the columns in respect of each invoice sto, submitted. If sufficient space is not available you must use a continuation sheet, headed with your tax registration number, endorsed Box 10 and attached firmly to the application form.

	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	Arrount of tax retund applied for	FOR OFFICIAL USE ONLY
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2) You are reminded that when tax is incurred by taxable persons who receive VAT group treatment, the group representative member must apply on behalf of all the members. As the supporting invoices produced will not necessarily be addressed to the representative member, the status certificate must also contain the members of those organized members who incurred the tax.

VAT 55 1R (06/95)



3) Refunds of tax incurred may only be claimed aubject to the rules of each state. Brief data is of supplies in each mamber state on which tax cannol be reclaimed are given in HM Customs and Excise Notice 723. Tax incurred on the following supplies with not be refunded by any member state: (a) supplies of goods which have been or are about to be excerted; and

(ь)	supplies to travel agents which are for the direct benefit of travellers.	Under this scheme the term "travel agent "	¹ includes tour operators or
	any person who purchases or re-supplies services to travellers.		

Number	Nature of geods of services	Name, VAT Registration No. (if known) and address of supplier of goods of services	Date and number of involce or import document	Amount of tax refund applied for	FOR OFFICIA USE ONLY
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VAT 66 - (05/25)

Рвдэ З.

H M Customs end Excese Certificate of Status of Taxable Person

The undersigned

(Name of local VAT office)

Regulation 178(1)(b)(i)

Name of taxable person	
Address	
Nature of activity	

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



Date

	Otlice stamp		
		Signature	
			(Name and grade)
VAT 66	CD 1017/N8(07/91)	F 50371	,

SCHEDULE 2

Regulation 3(1)

REVOCATIONS

Commencement Information				
I2	Sch. 2 in force at 20.10.1995, see reg. 1			

Statutory instrument number	Title of Regulations
SI 1972/1148	The Value Added Tax (Supplies by Retailers) Regulations 1972
SI 1973/293	The Value Added Tax (Trading Stamps) Regulations 1973
SI 1975/274	The Value Added Tax (Supplies by Retailers) (Amendment) Regulations 1975
SI 1979/224	The Value Added Tax (Supplies by Retailers) (Amendment) Regulations 1979
SI 1980/1537	The Value Added Tax (Repayment to Community Traders) Regulations 1980
SI 1985/886	The Value Added Tax (General) Regulations 1985
SI 1985/1650	The Value Added Tax (General) (Amendment) Regulations 1985
SI 1986/71	The Value Added Tax (General) (Amendment) Regulations 1986
SI 1986/305	The Value Added Tax (General) (Amendment) (No. 2) Regulations 1986
SI 1986/335	The Value Added Tax (Bad Debt Relief) Regulations 1986
SI 1987/150	The Value Added Tax (General) (Amendment) Regulations 1987
SI 1987/510	The Value Added Tax (General) (Amendment) (No. 2) Regulations 1987
SI 1987/1427	The Value Added Tax (Cash Accounting) Regulations 1987
SI 1987/1712	The Value Added Tax (Supplies by Retailers) (Amendment) Regulations 1987
SI 1987/1916	The Value Added Tax (General) (Amendment) (No. 3) Regulations 1987
SI 1987/2015	The Value Added Tax (Repayments to Third Country Traders) Regulations 1987
SI 1988/886	The Value Added Tax (Annual Accounting) Regulations 1988

Statutory instrument number	Title of Regulations
SI 1988/1343	The Value Added Tax (Repayment Supplement) Regulations 1988
SI 1988/2083	The Value Added Tax (General) (Amendment) Regulations 1988
SI 1988/2108	The Value Added Tax (General) (Amendment) (No. 2) Regulations 1988
SI 1988/2217	The Value Added Tax (Repayment to Community Traders) (Amendment) Regulations 1988
SI 1989/1132	The Value Added Tax (General) (Amendment) Regulations 1989
SI 1989/1302	The Value Added Tax (General) (Amendment) (No. 2) Regulations 1989
SI 1989/2248	The Value Added Tax (Accounting and Records) Regulations 1989
SI 1989/2255	The Value Added Tax (Bad Debt Relief) (Amendment) Regulations 1989
SI 1989/2256	The Value Added Tax (General) (Amendment) (No. 3) Regulations 1989
SI 1989/2259	The Value Added Tax ("Do-It-Yourself" Builders) (Refund of Tax) Regulations 1989
SI 1989/2355	The Value Added Tax (General) (Amendment) (No. 4) Regulations 1989
SI 1990/420	The Value Added Tax (Cash Accounting) (Amendment) Regulations 1990
SI 1990/1943	The Value Added Tax (Cash Accounting) (Amendment) (No. 2) Regulations 1990
SI 1991/371	The Value Added Tax (Refunds for Bad Debts) Regulations 1991
SI 1991/691	The Value Added Tax (General) (Amendment) Regulations 1991
SI 1991/1332	The Value Added Tax (General) (Amendment) (No. 2) Regulations 1991
SI 1991/1532	The Value Added Tax (Annual Accounting) (Amendment) Regulations 1991
SI 1992/644	The Value Added Tax (Cash Accounting) (Amendment) Regulations 1992
SI 1992/645	The Value Added Tax (General) (Amendment) Regulations 1992
SI 1992/1844	The Value Added Tax (Payments on Account) (No. 2) Regulations 1992

Statutory instrument number	Title of Regulations	
SI 1992/3096	The Value Added Tax (EC Sales Statements) Regulations 1992	
SI 1992/3097	The Value Added Tax (Accounting and Records) (Amendment) Regulations 1992	
SI 1992/3099	The Value Added Tax (Valuation of Acquisitions) Regulations 1992	
SI 1992/3100	The Value Added Tax (Refunds in relation to New Means of Transport) Regulations 1992	
SI 1992/3101	The Value Added Tax (Removal of Goods) (Accounting) Regulations 1992	
SI 1992/3102	The Value Added Tax (General) (Amendment) (No. 4) Regulations 1992	
SI 1992/3103	The Value Added Tax (Flat-rate Scheme for Farmers) Regulations 1992	
SI 1993/119	The Value Added Tax (General) (Amendment) Regulations 1993	
SI 1993/761	The Value Added Tax (Accounting and Records) (Amendment) Regulations 1993	
SI 1993/762	The Value Added Tax (Cash Accounting) (Amendment) Regulations 1993	
SI 1993/764	The Value Added Tax (General) (Amendment) (No. 2) Regulations 1993	
SI 1993/856	The Value Added Tax (General) (Amendment) (No. 3) Regulations 1993	
SI 1993/1222	The Value Added Tax (Repayment to Third Country Traders) (Amendment) Regulations 1993	
SI 1993/1223	The Value Added Tax (Repayment to Community Traders) (Amendment) Regulations 1993	
SI 1993/1224	The Value Added Tax (General) (Amendment) (No. 4) Regulations 1993	
SI 1993/1639	The Value Added Tax (General) (Amendment) (No. 5) Regulations 1993	
SI 1993/1941	The Value Added Tax (General) (Amendment) (No. 6) Regulations 1993	
SI 1993/3027	The Value Added Tax (General) (Amendment) (No. 7) Regulations 1993	
SI 1993/3028	The Value Added Tax (Cash Accounting) (Amendment) (No.2) Regulations 1993	
SI 1994/803	The Value Added Tax (Accounting and Records) (Amendment) Regulations 1994	

Statutory instrument number	Title of Regulations	
SI 1994/3015	The Value Added Tax (General) (Amendment) Regulations 1994	
SI 1995/152	The Value Added Tax (General) (Amendment) Regulations 1995	
SI 1995/913	The Value Added Tax (General) (Amendment) (No. 2) Regulations 1995	
SI 1995/1069	The Value Added Tax (General) (Amendment) (No. 3) Regulations 1995	
SI 1995/1280	The Value Added Tax (General) (Amendment) (No. 4) Regulations 1995	

Status:

Point in time view as at 20/10/1995.

Changes to legislation:

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