## F1F2F3F4F5F6SCHEDULE 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.
- F6 Sch. 1 Form 1 substituted (1.12.2006) by The Value Added Tax (Amendment) (No.2) Regulations 2006 (S.I. 2006/2902), reg. 3, Sch.

#### **Commencement Information**

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

#### Regulation 5(1)

HM Revenue & Customs	Value Added Tax (VAT) Application for registration
You can apply online Go to www.henc.gov.uk and follow the links for to it online?. How to fill in this form Piesee write deerly in black ink and use capital letters. If you need more space for any answers, continue on a separate sheet.	If you need help, look at the Notes or phone our National Advice Service on 0845 010 9000. You may have to send as other forms and supporting information as well as this form; you will be told what is needed as you work through the form. You can download any forms you need from www.hemc.gov. or phone the National Advice Service.
About the business	
Status of the business     Sole propriotors: please onter your full name -     first neme(i) followed by sumame	If the business is an unincorporated body, enter the type (for example, club, association, trust, charity, etc.)
Partmentifips: please enter your trading name. Or if you do not have one, enter the full names of all the partners. Partmentifips must also complete form 18872 and enclose it with this form.	Are you registering as the Representative Member or nominated corporate body of a VAT group? Read the glossary in the Notes for a definition of VAT group? Yes No      Yes, complete and enclose forms MATSD and VATST.     Business contact details Business oddress, that is, the principal place where most
If your need more space, use a separate sheat of paper. Partnerships now go to Question 5. Corporate or unincorporated bodies: please enter the name of the company, club, association, trust, charity, etc.	of the day to day numming of the business is carried out.
2 If the business has a trading name, enter it have	Contact telephone number Dusinees fas number
If the business is a corporate body registered in the UK, enter the following details from the Sertificate of incorporation Certificate number	Business enail actines
Date of incorporation	Business webelts address WWW.

	out the business continued	About the business continued
	Business activities Read the note for Quastilon 6. If the business activities are land or property-reliated, you may made to complete and endose form WJT1614. Main activities	UK bank or building society account Read the note for Question & Name of bank or building sodiety
		Account name
	Other activities	
		About your VAT registration
	F	Taking over a going concern
7	If you need more space use a separate sheet of paper. Are you (or any of the partners or directors in this busines) currently involved, or in the last two years have bose involved, in any other business in the UK or like of Men (UKI registered or not) either as a sole	o Are you registering for WIT because you have     othern over (or are about to take over) a business for     part of a business) as a going concern.     OR     oringed (or are about to shange) the legal status o     a WIT registered business?
	proprietor, partner or director? Read the note for Question 7.	Important: read the note for Question 9 before you answer.
	Yes No	Yes No
	If Yes, complete the boxes below. Business 1: name	If Nes., anter the date the transfer or change took place is intended to take place.
		D D M M Y Y Y Y
	Business 1: WI number (if applicable)	This will be your effective date of registration.
		What go to Question 13 - ignore Questions 10 to 12.
	Tick if still tracing	16 What is the previous owner's name?
	Business 2: name	11 Enter the previous owner's VAT number of applicable
	Business 2: WAT number (If applicable)	
		12 Do you want to keep the previous owner's WIT number Important; read the note for Question 12 before
	Tick if still trading	you answer.
	If you need to show details of more than two businesses,	Ves No
	une a separate sheet of paper.	If 'tes, you and the previous owner will need to complet form WT69 and enclose it with this form. Now go to Question 18 - sprore Questions 13 to 17.

Voluntary registration	Exemption from registration
Are you applying for voluntary registration because your turnover is below the registration threshold?     Insportance must be invested for Question 13 before you answer.     Yes No No     No No     Yes, bo No     No No     Yes, bo Question 14.     Y hos, bis one of the bores delow.     Ny humover is below the currient registration threshold but I want to register now.     Interest for make taxable supplies     In the future.     Iam established, or have a fixed stablishment,     In the Litture.     Iam established, or have a fixed stablishment,     In the Litture.     Iam established, or have a fixed stablishment,     In the UK and make, or interviat the supplies     only outside the UK.     What dates you with ho be registered from?     D Ni Ni Y Y Y Y	Exempletin memory autom     Boyou want to apply for exemption from registration?     Revet the note for Question16.     You can apply for exemption from registration if mest of     your supplets are zero-rated.     Yes No     Write, estimate the value of your zero-rated supplets over     the next 12 months     E      Visu zerowend his to one or both of Questions 14 and 15     and are not negative exemption from registration, go to     Question 17.     Earlier registration     T3 Application for earlier registration
do to Question 19 - ignore Questions 14 to 17. Compulsory registration Important med the notes for Questions 14 to 15 before you ensuer.	Enter the month and year you want to be registered from.           D         D         M         M         Y         Y         Y           Go to Question T8.         X
<ul> <li>Are you registering because your tasable tarrover have gone over the registration threshold in any pais period of 12 months or less? <ul> <li>Yes</li> <li>No</li> <li>Are you registering because you had an expectation on any date that your tasable tarrover would go over the registration threshold in the next 30 DN/S ALONE?</li> <li>Yes</li> <li>No</li> <li>of the enter the date you first expected this to happen.</li> <li>D</li> <li>M</li> <li>M</li> <li>Y</li> <li>Y</li> </ul></li></ul>	VAT repayment.  Do you espect the WAT on your purchases to regularly exceed the WAT on your taxable supplies?  Baud the node for Quartan 18.  Yes No  N Tex, say why.
	if you need more space, use a separate sheet of paper

inter your estimate of your taxable supplies in the seat 12 months	Home address
£	
To you expect to make any exempt supplies? 	Pistinoie
tes No	If you have lived at this address for fewer than three years, enter details of your previous address.
to you expect to buy goods from other EU nember states in the next 12 months? Read the note for Quession 21.	Previous horne address (if applicable)
les No	
f Yes, enter the total estimated value	
E	Postoade
to you expect to sell goods to other EU nember states in the next 12 months?	Home telephone number
les No	Date of birth
Yes, enter the total estimated value.	
E	National Insurance number
icent details and declaration	
This section must be completed by the sole owner of the business, or a partner, or a director or the company secretary or an authorised signatory of a corporate body, or	If you are a nen-UK national and do not have a National insurance number, enfory your tax identification number in your country of origin and the name of that country
unincorprated body, for example, secretary, trustee, or an authorised agent.	23 I declare that the information given in this form and accompanying documents is true and complete
f this form is being signed by an authorised signatory, or in authorised agent, the details of the person authorising ou must be shown at Question 22.	Please use the Checklist on page 6 of the Notes to make sure you send everything we have asked for. Signature
	Date
	D D M M Y Y Y Y
	Capacity in which you signed this application (for example, proprietor trustee, company secretary)
	eet 12 months E  to you expect to make any exempt supprise? Cool at the first of WAT terms in the Acots of you need to you expect to buy goods from other EU estimates and the supprise. estimate the total estimated veloce E  No

Form No. 2

/		
ALLE AL	HI Custores and Excise	For official use only Date of receipt
ALUETAX ALUETAX DED Parmership Decar Parmership Decar	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.	Registration No. (where known)
Full name		
Home address		
Postcode Home telephone	Mobile telephone	<u> </u>
	Number or Tax Identifier in country of origin	
Signature Portnor dotaile	Date	
Partner details		
Full name Home address		
Postcode		
Home telephone	Mobile telephone	
	e Number or Tax Identifier in country of origin	
Signature	Date	
Partner details		
Full name Home address	L	<u> </u>
Postcode		
Home telephone	Mobile telephone	
National Insurance	Number or Tax Identifier in country of origin	
Signature	Date	
Partner details		
Partner details Full name		· · · · · · · · · · · · · · · · · · ·
Full name		
Full name Home address	Mobile telephone	
Full name Home address Postcode Home telephone		

	Partner details	
5	Full name	
	Home address	
	Postcode	
	Home telephone	Mobile telephone
		e Number or Tax Identifier in country of origin
	Signature	Date
	Partner details	
6	Full name	
	Home address	
	Postcode	
	Home telephone	Mobile telephone
		e Number or Tax Identifier in country of origin
	Signature	Date
	Partner details	
7	Full name	
	Home address	
	Postcode	
	Home telephone	Mobile telephone
		e Number or Tax Identifier in country of origin
		Date
	Signature Partner details	
8	Full name	· · · · · · ·
	Home address	· · · · · · · · · · · · · · · · · · ·
	Postcode	
	Home telephone	Mobile telephone
		e Number or Tax Identifier in country of origin
	Signature Partner details	Date
9	Full name	
	Home address	
	Destas da	
	Postcode	
	Home telephone	Mobile telephone
		e Number or Tax Identifier in country of origin
(AT 2 :	Signature	Date

Form No. 3

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	*Live transferred a business as a going concern on	
date 19	date - 19	
from (name of previous owner)	to (name ບໂ ຄຣະ ອາກາດເ)	
*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:	
<ul> <li>to send *my/our first VAT return to Customs and Excise with all the VAT due for the whole period covered by the return.</li> </ul>	<ul> <li>the new owner will be entitled to reclaim any lopet tax which "I/we could have reclaimed if the registration number had not been transferred</li> </ul>	
<ul> <li>to send in any retaints the from bit not made by the previous owner</li> </ul>	• any payment made by Customs and Excise to the new owner will satisfy any right *Ewe have to that money	
<ul> <li>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 assess kept by the previous owner.</li> </ul>	*I/we have retained stocks and assets valued at $\frac{2}{100000000000000000000000000000000000$	
<ul> <li>that any return made in the previous owner's name for a period after the transfer date will be regarded as made by "metos</li> </ul>		
<ul> <li>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.</li> </ul>		
Signalure(s)	Signature(s)	
(Propnetor, partners, director, company secretary)	(Proprietor, partners, director, company secretary, executor)	
J <sub>a</sub> ie 19	date 19	
ndolete as neocasary	*delete us necessary	

			Regulation 25(1)
HM Customs and Excise	Value Added Tax Return For the period to	For Official Use	
Γ		Registration number If your completed return a payable are not received I you will be in default and a financial penalty	by the due date
L		Due Date: For official use D O R only	

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.

			£	р
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 <b>purchases</b> 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 <b>purchases</b> and all other inputs excluding any VAT. Include your box 9 figure	7		00
	Total value of all <b>supplies</b> of goods and related costs, excluding any VAT, to other <b>EC Member States</b>	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	DECLARATION: You, or someone on your behalf, must sign	n below.		
a payment please tick this box.	I,		decla	re that the
	information given above is true and complete.	LETTENS)		
	SignatureDa	to		
	A false declaration can result in			
VAT 100 (full)	Page 1			PT1 (June 2004)

Form No. 5

		I	Regulations 23, 25(4)
HM Customs and Excise	Final Value Added Tax Return For the period to	For Official Use	
		Registration number	Period
			9999
	1	If your completed return a payable are not received you will be in default and a financial penalty	by the due date
		Due Date:	
L		For official use D O R only	

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.

		L	P
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		
	VAT reclaimed in this period on <b>purchases</b> and other inputs (including acquisitions from the EC)		
	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.	DECLARATION: You, or someone on your behalf, must sign below I,	decla	re that the
	information given above is true and complete.		
	SignatureDate A false declaration can result in prose		
VAT 193 (full)	Page 1		PT1 (June 2004)

Form No. 6

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

Status: Point in time view as at 01/04/2009. **Changes to legislation:** There are currently no known outstanding effects for the The Value Added Tax Regulations 1995. (See end of Document for details)

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

.

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space between words Г

2. Enter the NAME of the UK TAX REPRESENTATIVE (see note 2)
<u>╴╵┊╵┙┉┉┹╍┙┉┙╱┉╅╸┙╶╴╴╴╴╴╴╸╸╸╸╸╸╸╸╸╸╸╸╸╸╸╸╸╸</u>
<mark>╴╵╛╵╵╎┇╹╵╵╵╎└└┟┟┟╞╞┶┷╅┛┉╽┇╵╢╸┟┛┿┹┷┻╋┿╋╹╵╵╵┚╶</mark>
<ol> <li>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</li> </ol>
4. Describe your main BUSINESS ACTIVITY IN FULL please (See note 4)
<ol><li>Who is the BUSINESS OWNED by ? (See Note 5 and tick ONE BOX only)</li></ol>
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 setting threshold at any
time in the calendar year commencing 1st January 1993 or any subsequent calendar year?
YES and Lexceeded the threshold on Go to 17
NO Go to 9
VAT 1A CO 3429(1/19) (1 //92)

 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
Signature
Tick an <del>o</del> box
Proprietor Partner Director
Company Secretary Authorised Official Trustee (including tax representative)
CD 3429/2113/11981

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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	ن ااحداد رام ک	┕┛╌┖╽	ᇿᅟᆂᄮᄮ		

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

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		•	:	•	· I
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			;		

3. Enter the address of your PRINCIPAL PLACE OF BUS/NESS

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	ı	I	I	I	•	I	1	1	1	!	I		1			L			L	1	I	1	L				I		1	
	!	ī	ī	1		I	1	1	4	;	í	1	1	1	-		1				1		1	1	ריי י			-	1	
Phone No.	1	1	1	1	;	1	1	L	1	÷	1	;	1	1		1	1		1	1	1	1	1	1		_	1	1	1	
	i	1	1	1		1	1	1	1	÷	ŧ	4	1	1	-	1	1	;	1	;	1	1	_		1				1	
																		P	os!	tcô	de	;	1	1		1	1		1	

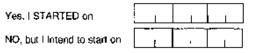
4. Describe your main. BUSINESS ACTIVITY IN FULL please (See note 4).

L	 			 	 

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

Sale Proprietor		
or Partnership		Please ensure you ALSO complete form VAT 2.
or Limited Company		Please enter details from Company Incorporation Certificate below.
or Other 🔸		Please give details
6. Enter EITHER your	BANK S	ORT CODE and ACCOUNT NUMBER or your GIROBANK ACCOUNT NUMBER
7. Do you use a COMP	UTER F	OR 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 00.0490/0/06(11/92)

9.	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
because the value of my acquisitions from 1st January amounted to £
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 OUESTION 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 HEQUIRED 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       ξ         No
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 one box
Company Secretary Authorised Official Trustee

Form No. 7A

#### 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

 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.

Yes

2. Do you have a trading name?

	п.
1	

No

Please give the trading name of the business.

#### **Business address**

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

Postcode	Phone number	
	Fax number	

#### Tax representative

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

Name	
Address	
	Phone number
Postcode	Fax number
	IB(March 2000)

#### Status

5.	What is the structure/legal status of the	business? (Please tick)	
	Sole proprietor	Partnership	
	Corporate body	(Please give your company incorporation del	ails)
		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.

•	
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1	
L	
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#### Bank details

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

Sort code	Account number
	or
No bank account (please tick)	Girobank account number

#### **Computer accounts**

### 8. Is your accounting system computerised?

	No		
Computer type	 		
Software	 	Version	

#### **Relevant supplies**

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

ſ	Yes, I made my first relevant supply on	
	No, but I expect to make my first relevant supply on	
VATIC	 IB(March 2000)	

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?
	2
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.
Tran	sfer 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 Thirteeneth Directive refund schemes.
ſ	[······
Exen	nption
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
Othe	r 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)
ſ	
l	
VAT1	C IB(March 2000)

#### Declaration

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

Signature			Date	
Full name				
What is your position	in the business? (	Please tick)		
Proprietor		Partner	Direct	or
Company Secretary		Trustee	Other	
			If "Oth	ner", give details
Checklist				
<ul> <li>Have you signed</li> </ul>	vered every questic ed the form? Remember to compl			

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.

			D M	Y Stagger Status
Local office code and registration number				
Name			Trade classification	Taxable turnover
Trade name				
	Comp. Group user Div Intg. Overse	eas Intg. EC V.	alue of Sales to EC	Value of Purchases from EC
Registration	Obligatory/Voluntary	Exemption	Intending	Transfer of Regn No
Approved - Initial/date				
Refused - Initial/date				
Form issued - Initial/date	VAT9/ other	VATB	Letter	Approval letter
T1C		IB(March 2000)		

	4. Daclaration		P. P.
VAT? - Distance Selfing ' which will help you to answer these questions. Please write clearly in black lnk. 1. Who is the business owned by? Please give the persons tu I name and	V6	(Full name of PRINCIPAL in BLOCK LETTERS)	
address of the principal place of business.	(Full name of TAX RE) declare that all the entere are correct and complete	(Full name of TAX REPRESENTATIVE in BLOCK LETTERS) are that all the entered details and information in any accur correct and complete	(Full name of TAX REPRESENTATIVE in BLOCK LETTERS) declare that all the entered details and information in any accumpanying documents are correct and complete
	Signature of Principal Tick one box		Signature of Principal
Phone No.		Partner	Director
Please give the UK VAT Registration number (if arry)	Company Secretary	Authorised Official	Trustee
2. Enter the full name and address of the UK Tax Representative	Signature of Tax Representative		Date
		Pather	Dreator
Phone No. Postcode No. Postcode No. Prese give the date of appointment of Tax Representative and VAT	Compary Secretary	Authorised Official	Trustee
registration number (it any) Date of appointment	CD M78491-1684		

Form No. 9

21

Regulation	191(1)
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VAT 65A

	is it Aef	ns your test application? Il not, please glue arance No.
HIM Customs and Excise	۳.	HM Customs and Excise APPLICATION
Official authority to which the application is addressed	L	8th/13th Directive     by a business person not       Custorn House     established in the Community for       PO Box 34     REFUND OF       LONDONDERRY BT49 7AE     VALUE ADDED TAX       Northern Ireland
	1	Foremanness and sumiamie or name of time of applicated
		Plane, country and post code
	2	Particulars of the Official Authority and taxitualness Registration No. In the country in which the applicant is established or has higher domicile or normal place of readence.
	3	
	4	Period is which the application refers
	6	Total amount of refund requested (in Nguras) (see overlead four femosed 3:27)
	ę	The applicant requests the refund of the amount shown in heading 5 in the manner described in heading 7
(*) Insert x 📂		Method of satbement requested (*) Bank abcount ecount
approonate box		Account in an internative of a second
	7	None and address of the financial body
		<mark>──╋──<mark>┨╷╷╎╶┨──╢╴┧╴┡──╅╌╋╌┡──<mark>┟╶┢──╋┈┟╴┧╸</mark>┫╸╎╽╴┡╷<sub>┍</sub>╽╴┟╴╿┍┙┥╶┨╴╿╶╻┍┷╽╼╿╴╿╴╽╺┙┨╴╿╴┝╺┫╶╢╸╿ <mark>╴</mark></mark></mark>
	8	
	•	No. of documents endosed. An analysis and an analysis in two loss and an analysis and a second s
		(a) that the goods or services specified overfeat were used for the following business activities in the United Kingdom
	9	
		(b) that in the United Kingdom during the period covered by this application, he/she engaged in
		(*) no subply of goods or services
(*) Insert X		(*) only the provision of services in respect of which tax is payable solely by the person to whom they are supplied
appropriate box		(*) only in the provision of certain exempted transport services ancillary thereto
		(c) that the carriculars given in this application are true
		The applicant undertakes to pay back any monies wrongfully obtained
		Αλ
		NOTE: Box 10 eventeal MUST be completed
VAT 65A	¢	Page 1, [7954[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 invoxe or import document	Amount of tax refund applied for	FOR OFFICIAL USE ONLY
			· · ·		
	·····				
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			:		
		Pao	C/F		

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;

91	supprice to travel agents which are for the direct benefit of traveliers. Under this scheme the term "travel agent "includes teur
	operators or any person who purchases or re-supplies services to travellers

Number	Nature of goods or services	Name, VAT Registration Nc. (I 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
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					·····
				,	
•					
			TOTAL		
		Pa	,e3 <b>TOTAL</b>		

CD 0074/2/NB(01/84)

	Regulation 191(1)(b)
	Ificate of Status of Jusiness Person
The undersigned	re and address of official authority)
certifies that	(Name of business person)
	(Nature of activity)
φ	Address of the Establishment)
is a registered business person i	n(Name of country)
*his registration number being	
Date	
	Signature
Office date stamp	
	(Name and grade)
·	 
*If the applicant does not have a state the reason for this.	a registration number, the official authority should
VAT 66A CD 32954N5(07/82)	F 8609i )

Regu	lation	201	(a)
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	VAT refunds for DIY builders	Oflice Jate stamp
HM Castonia and Excise Part 1	Series number of distin	

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.

Your full name	Name of occupant of dwelling (if different)
If you are claiming on behalf of a charity: Name of charity	Your status (is Secretary, Director, duly authorised person)
<ol> <li>Addreas of building you are claiming for</li> </ol>	2. Your address (fidifferent)
Postovde, , , , , , , , , , , , , , , , , , ,	Postcode
To which above address should the refund be sent?	2;
Your daytime phone number Date of completion	Date of occupation or use
	ionih year day month year
	19 19
Are you, or have you seen, a director,	If Yes', you must give the VAT
sole proprietor or parmer of any VAT Yes No	registration number here
registered business?	
Is your claim only for goods used to 'fit out' or 'finish off' the buildin (paragraph 4 of the Notice)?	
Summary of Perts 3 and 4	£ p
Total amount of VAT claimed on Part \$ (Taken from 'VAT paid' of	column of Part 3)
Total amount of VAT claimed on Part 4 (Taken from Calculated	VAT' columin of Part 4)
	Colal amount claimed
Declaration	

I declare that:

- I have read Notice /19
- 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

page 3

- Lam only requiring VAT which was correctly charged to me, and which Loaid, on goods / imported or bought from a VAT registered supplier
- planning permission has been granted for the building described in Part 9.

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,

灖		refüri bulldi			2	Name of claimar	n (BLOCK LETTE)
Part 2	e Dese	sriptic	n (s)				
	of go	ods :	nder	ne ka se ik k	ised.		The second
Please wri	ite in black in				ke a mislake, cross it qu	ut and insert the cor	rrect detaits above
						king the claim mus	
	on of buildin			Number of storey	/5	Number of	· · · · · · · · · · · · · · · · · · ·
Type eg b	ungalow, vill		<u></u>	(Count ground floo	r .	reception rooms	
				as one storey) Number of	<b>_</b>	Number of	r
Ĺ				bedrooms		bathrooms/ cloakrooms	
<ul> <li>Detached</li> </ul>	∜semi-detaci	hed/lemace	ed	Number of	[	1	
				kitchens		Ground floor area	a 15
Garages					Number and descrip	tion of other rooms	
Built-in	Number	Single 1 double	Total Nuo	ranea <sub>f</sub> ∛. ∕mi			
		BIDLOD	<u> </u>	/㎡			
Detached	Number	Single * double	Totalitos	ranea 🖓	i		
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Name of claimant (BLOCK LETTERS)
·

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

When you fill in this part, y	ou must:					
<ul> <li>Ilst those goods and mat which you have invoices documents showing VA separately. Don't includu not eligible for the schem at the back of Notice 719 examples of items not co</li> </ul>	or import T a items to - the list gives	<ul> <li>either subtract the an credit note you receiv relevant invoice entry in the list and subtract</li> <li>attach all the original import documents to it</li> </ul>	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.			
the scheme	Norect Cy	same order as they a	re listed.			
f Brief description of goods	2 Quantily of goods	3 Supplier's name	<ol> <li>Invoice nun other reterence (eg Customs e</li> </ol>	e number	5 VAT paid £	þ
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<u> </u>					<b> </b>	
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VAT 431 (Pt 5)

POD:ALlanosty 1990)

Carry forward overleaf

		1 -		
	VAT refunds for	· /	Name of claimant (BLOCK LETTERS)	٦.
/職人	DIY builders	ter <b>f</b>	·	-
Part 4; 0	Goods and mater	als claimed for		-
И.	rhere involces d	orvit show WATI sep	arately	

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 /19 gives examples of items not covered by the scheme
- either subtract the amount of any credit hole 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.

l Brief description of goods	2 Quantity of goods	3 Supplier's name	4 Invoice number	5 Total arnou paid for good £ p	unt 6 ds Ca ໂ	alculated VAT \$
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			Totals			

VAT 431 (Pt 4)

PDD04 (January 1990)

Carry forward overleaf

#### Regulation 21, 22, 23

Å.	Value Added Tax EC Sales list For the period To	
HM Customs and Exper	GE	VAT Registration Number Branch/subsidial
Г	Yoı Ify by	
	ا telephone number is	For official use D O R ozly
Before you fi	Il in this form please read the notes overleaf.	
Cauntry Code	Customer's VAT Registration Number	Total value of supplies ind £ p i <sup>cati</sup>
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	i	─── <u>┤</u> ···┘ ┘ ┘ · · <del>┘ · · · · · · · · · · · · </del>
<sup>B</sup> L_	<u> </u>	─── <del>─────────────────────────────────</del>
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12		
13		
14		
15		
Number	of pages completed	Lines completed (this page only)
	n: You, or someone on your behalf, mustisign below	
I	(Full name of signatory in BLOCK LE	TTERS: declare that the
	given above and on any continuation sheets is true a	
Signature .	A false declaration may result in the ir	
Could you pl	ease supply a	
Contact Nan	ne:	

	Regulation 22(6),
for removal from the UK to another Memi See notes overleaf before completing	ber State of the European Community
For the purchaser to complete	For the Supplier to complete Full Name and Address
Surname (Mr./Mrs./Miss)	
Forename(s)	
Full Address in the UK	
	. Telephone
	Vat Registration No. IGB
lelephone	• Details of the New Means of Transport
Permanent/Temporary (Delete as applicable) Full address in Member State of Destination	Motorised Ship Aircraft Land Vehicle Ship Aircraft
	Make
	Model
[alephone]	Colour
Permanent/Temporary (Delete as applicable)	Registration No.
re you: a UK Resident? an overseas visitor?	Engin <del>s</del> No.
	Chassis/Hull/Almane No.
Tick one box)	Invoice No. and date
Vie you a serving member YES/NO	Date of Supply
If HM Forces?	Purchase Price
Member State of destination of the New Means of Transport in which VAT will be paid	VAT not paid at lime of supply
I Declare that:	Design That
<ul> <li>I have read notice 728 and the notes overleaf;</li> <li>I latend to recover the New Meens of Transport departition.</li> </ul>	I Declare That:     the New Means of Transport described above complies
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;	with the definition given in notice 725 about VAT and the Single Market
I intend to notity the fiscal authority in that Member State and pay any tax due;	<ul> <li>the information given above is correct</li> </ul>
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;	Signature Date Status; Proprietor/Partner/Director/Company Secretary/Authorised Parson
The information I have given above is correct.	(Oeinte as applicable)
Signature	
Date	
	J., 1905i

Value Added Tax

Regulation 204(c)

	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)				
	Postcode Tel No.				
3.	Please describe your BUSINESS INCLUDING NON-FARMING ACTIVITIES. (See note 3)				
-	Please enter the ESTIMATED VALUE of AGRICULTURAL SUPPLIES you expect to make in the next 12 months. (see note 4)				
	Please enter the ESTIMATED VALUE of SUPPLIES OF OTHER GOODS and 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)				
	You must complete the following declaration :      Immediate that the information entered on this form is true and complete.     I apply for cancellation of the VAT registration shown at box 7 above.     Signature     Tick one box     Proprietor     Partner     Company     Authorised     Secretary     Official				
All'd Refe					
VAT	Т98 сахореницияся; F зеро; Исхиномы си				

Form No. 15

<u>\_</u>\_\_\_\_

		Regulation 178(1)(a)
	Is 1 Rel	vis your linst application? If not prease give erende Nuu
HIM Customs	1	· · · · · · · · · · · · · · · · · · ·
and Excee	I	APPLICATION
Competent authority to which the application is addressed	۔ ا	by a business person established in the Commun ty for REFUND OF VALUE ADDED TAX {Prease read the explanatory notes before filling in)
		Foreinames and surname of heme of time of applicant
	1	Thouse number and street frame
	11	Plaue, munity and musi code
	Ł	Nature of applicants business
	ĻŽ	1 Pankulars of the Cillion: Authority and taxibus rises Registration No. in the country in which the applicant is established or has bighter remarked or
	з	normal place of residence
	4	Period to which the application raters
	5	Total amount of refixed requested (in ligures) [see overlas? for lemised1st)
	6	The applicant requests the refund of the amount shown in heading 5 in the manner desentors in heading 7
(*) Insert x		Method of settlement requested (*) Bank Postal account
in the appropriate		Account number of tinancial body
box		
	17	
	[	Name and address of the financial body
	a	<u>· · · · · · · · · · · · · · · · · · · </u>
	F	No.ofdocur ents enclosed
		(a) that the goods or services specified overleaf were used for the following business activities in the United Kingdom
	9	<ul> <li>that in the United Kingdom owing the period covered by this application, he/she engaged in (****)     </li> </ul>
		(1) the supply of goods or services
(1) laged x	-	(1) only the provision of services in respect of which tax is payable sulley by the person to which they are supplied
sopropriate box		() only in the provision of ostain exempted transport services and any thereto
		(c) that the particulars gives in this appication are one
		The asplicant undertakes to pay back any ronnies wrongfully optained
		A:
		NOTE: Box 10 overheaf MUST he completed
		Page I.
VAT 65		PC_1(Pay, 1995)

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## 10 Statement itemising 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 etc. 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.

Number	Nature of goods or services	Name, VAT Registration No. (If known) and address of supplier of goods or services	Oate and number of invoice or import document	Arrount of tax retund applied for	FOR OFFICIAL USE ONLY
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			C/F		<b>.</b>

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 cartificate must also contain the names of those oroup 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 excirted; and

(ь)	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 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
			TOTAL B/F		
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			TOTAL		:

VAT 66 - (05/25)

Рвдэ 3.

Regulation 178(1)(b)(i)

Status: Point in time view as at 01/04/2009. Changes to legislation: There are currently no known outstanding effects for the The Value Added Tax Regulations 1995. (See end of Document for details)

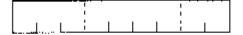
H M Customs end Excese Certificate of Status of Taxable Person

The undersigned

(Name of local VAT office)

Name of taxa	able person	 		
Address		 		
		 	 	•••••
Nature of ac	tivity	 	 	
Nature of ac	NARCA			

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 )

[<sup>F7</sup>Form No. 17CERTIFICATE REQUIRED TO SECURE RELIEF FROM VAT ON PURCHASED OR ACQUIRED GOODS INTENDED TO BE PLACED IN A FISCAL WAREHOUSING REGIME

#### 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 eligiblity 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**

F7 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. 18CERTIFICATE 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 elgible for zero-rating.]

#### **Textual Amendments**

F7 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

[<sup>F8</sup>SCHEDULE 1A

Regulation 145F

#### **Textual Amendments**

**F8** Sch. 1A inserted (28.4.1996) by The Value Added Tax (Amendment) (No. 3) Regulations 1996 (S.I. 1996/1250), regs. 1(1)(2), 16, Sch. 2

The fiscal warehousing record which is referred to in paragraph (3) of regulation 145F shall have the features and comply with the requirements set out below.

- 1. Goods in and out of a fiscal warehouse and its regime
  - (a) It shall accurately identify any eligible goods which enter or exit the fiscal warehouse, their nature and quantity, and the time and date when they so enter or exit.
  - (b) It shall accurately identify any goods which are not eligible goods and which enter or exit the fiscal warehouse for storage (other than goods which enter for purposes wholly incidental to such storage), their nature and quantity, and time and date when they so enter or exit.
  - (c) It shall accurately identify all eligible goods which are allocated to or removed from the fiscal warehousing regime associated with the relevant fiscal warehousekeeper, the time and date when the allocation or removal takes place, and the location of the eligible goods while they are allocated to the relevant regime.
  - (d) It shall accurately identify as "transferred goods" all eligible goods which are transferred directly from the fiscal warehousing regime to another fiscal warehousing regime, the time and date when the transfer starts, and the address of the fiscal warehouse to which the goods in question are transferred.
  - (e) It shall accurately identify as "transferred goods" all eligible goods which are transferred directly from the fiscal warehousing regime to corresponding arrangements in another member State under regulation 145H(2)(b), the date and time when the transfer starts, and the address of the place in the other member State to which the goods in question are transferred.

- (f) It shall accurately identify as "transferred goods (by reason of export)" all eligible goods which are directly exported from the fiscal warehousing regime to a place outside the member States under regulation 145H(2)(c), the date and time when the movement of the goods which is directly associated with the export starts, and the address of the place outside the member States to which the goods in question are consigned.
- 2. Specified services performed in a fiscal warehouse

It shall accurately identify the nature of any services which are performed on or in relation to eligible goods while those goods are allocated to the relevant fiscal warehousing regime, the date when the services are performed, the particular eligible goods on or in relation to which they are performed, and the name, address and registration number (if any) of the supplier of those services.

- 3. Documents relating to transfers and specified services
  - (a) It shall include the written undertaking from the other fiscal warehousekeeper relating to a transfer made within the United Kingdom referred to in regulation 145G(2), the certificate from the other fiscal warehousekeeper confirming a transfer made within the United Kingdom referred to in regulation 145G(3)(c), and it shall relate them to the relevant transfer.
  - (b) It shall include the copy of the certificate relating to a transfer received by the relevant fiscal warehousekeeper from another fiscal warehousing regime within the United Kingdom referred to in regulation 145G(3)(d) and it shall relate that copy to the relevant allocation to his relevant fiscal warehousing regime.
  - (c) It shall include the document relating to the completion of a transfer to corresponding arrangements in another member State referred to in regulation 145H(4)(b) and it shall relate that document to the relevant transfer.
  - (d) It shall include the document relating to the completion of an export to a place outside the member States referred to in regulation 145H(4)(c) and it shall relate that document to the export in question.
- 4. Procedures where transfers are not completed
  - (a) It shall be adjusted to show a removal (and not a transfer) where the certificate of transfer within the United Kingdom referred to in regulation 145G(3)(c) is not received in time from the other fiscal warehousekeeper.
  - (b) It shall be adjusted to show a removal (and not a transfer) where the document referred to in articles 145H(4)(b) or 145H(4)(c) concerning goods which have been transferred to corresponding arrangements in another member State, or which have been exported to a place outside the member States, is not received in time.
  - (c) It shall evidence any notification made under regulation 145H(3)(c) to the person on whose instructions the goods were allowed to leave the fiscal warehouse.
- 5. Removals from a fiscal warehousing regime
  - (a) It shall identify the name and address of any person who at any time removes or causes the removal of any goods from the fiscal warehousing regime and that person's registration number if he is registered under the Act.
  - (b) It shall include a copy of the removal document issued by the Commissioners under regulation 145J(1) and shall relate it to the relevant removal.
- 6. Miscellaneous
  - (a) It shall incorporate any modifications to the features or requirements set out in paragraphs

     to 5 above which the Commissioners may require in respect of the relevant fiscal
     warehousekeeper.

(b) A fiscal warehousekeeper may, with the prior agreement of the Commissioners, maintain a fiscal warehousing record in which any of the features or requirements set out in paragraphs 1 to 5 above are relaxed or dispensed with.]

#### SCHEDULE 2

Regulation 3(1)

#### REVOCATIONS

Commencement Information					
12	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

Statutory instrument number	Title of Regulations
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
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

Statutory instrument number	Title of Regulations
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
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

Statutory instrument number	Title of Regulations
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
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 01/04/2009.

#### Changes to legislation:

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