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

F1F2F3F4SCHEDULE 1

Regulation 5(1)

Textual Amendments

- F1 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
- **F2** 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.**
- **F3** 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.**
- **F4** 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

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

Form No. 1

Regulation 5(1)

HM Revenue & Customs	Value Added Tax (VAT) Application for registration
You can apply online Go to www.hmc.gov.uk and follow the links for took online. How to fill in this form Please write dearly in black ink and use capital letters. If you need more space for any answers, continue on a separate sheet. About the business	If you need help, look at the Notes or phone our National Advice Service on 0845 010 9000. You may have to send us 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.ul or phone the National Advice Service.
The second secon	If the business is an unincorporated body, enter
Status of the business Sole proprietors: please enter your full name - first name(i) followed by sumame	If the business is an unincorporated body, enter the type (for example, club, association, trust, charity, etc.)
	Are you registering as the Representative Member or
Partnerships: please enter your trading name. Or, if you do not have one, enter the full names of all the partners. Partnerships must also complete form MAT2 and enclose it with this force.	mominished corporate body of a WAT group? Read the glossary in the Notes for a definition of 1997 group? Yes No
	If No, complete and enclose forms MATSO and WATST. S Business contact details
	Business address, that is, the principal place where most of the day to day running of the business is carried out.
If you need more space, use a separate sheet of paper. Partnerships now go to Question 5. Corporate or unincorporated bodies: please enter the	
name of the company, club, association, trust, charity, etc.	
	Postcole Contact telephone number
2 If the business has a trading name, enter it here	Conscioned names
	Business fax number
3 If the business is a corporate body registered in the UK, enter	Business mobile telephone number
the following details from the Certificate of incorporation Certificate number	Eunireon ernall address
Date of incorporation	Business website ackinoss
DDD MM Y Y Y Y Country of incorporation	www.

/po	out the business continued	About the business continued	
	Business activities Read the note for Question 6. If the business activities are land or property-eleted, you may need to complete and enclose form WAT1614. Main activities	UK bank or building society account flead the note for Question 8. Name of bank or building society Account name Sort code Account number	
	Other activities		
		About your VAT registration	
7	If you need notre space, one a separate wheet of paper. Are you liprary of the partners or electors in this business) currently involved, or in the last two years have been involved, in any other business in the UK or islo of Man (Will registered or not) either as a sole proprietor, partner or director? Read the note for Guestion 7. Yes No	Taking over a going concern Are you registering for WiT because you have taken ever for are about to take over! a business for part of a business' as a going concern. AR changed for are ebout to change; the legal status: a WiT registered business? important: read the none for Question 8 before you arise. No. Miles, enter the date the transfer or change book piles is intended to take pilet. D. D. M. W. Y. Y. Y. Y. This will be your effective date of registration. Miles, porto Question 13 - ignore Questions 10 to 12.	of
	Business 2: name	11 Enter the provious owner's WT number (if applicable)	
	Business 2: WAT number (if applicable)	12 Co you want to keep the previous owner's WT numb	er?
	Tick if still trading if you need to show details of more than two businesses, are a separate sheet of paper.	Asportant, read the note for Question 12 before you arraver. Yes No No Notes that the previous owner will need to complete from WITEB and enclose it with this force. Now you no Question 14 is inproc Questions 13 to 12.	

About your VAT registration continued	
Voluntary registration	Exemption from registration
13 Are you applying for voluntary registration because your turnover is below the registration threshold? Important nead the most for Question 13 before you arraver. Yes	Boyou want to apply for exemption from registration? Read the note for Question 16. You can apply for exemption from registration if most of your supplies are zero-rated. Yes No
	if you need more space, use a separate sheet of paper.

Your turnover	Applicant details continued
Enter your estimate of your taxable supplies in the next 12 months	Home address
E .00	
to Do you expect to make any exampt supplies? Look at the list of IAIT terms in the Mozer If you need more information about exampt supplies.	Profitoide
Ves No	If you have lived at this address for fewer than
Do you expect to buy goods from other EU member states in the next 12 months? Read the note for Question 21.	three years, enter details of your previous address. Previous horne address (if applicable)
Yes No	
N Yes, enter the total estimated volve	
E	Postonde
Do you expect to sell goods to other EU member states in the next 12 months?	Home telephone number
Ves No	Date of birth
If Yes, enter the total astimuted wive.	DD MM YYYY
E 00	National Insurance number
pplicant details and declaration	If you are a non-UK national and do not have a National
This section must be completed by the sole owner of the business, or	Insurance number enter your tax identification number in your country of origin and the name of that country.
a partner, or	
 a director or the company secretary or an authorised signatory of a corporate body, or 	
 an officer or official applying on behalf of an unincorprated body, for example, secretary, trustee, or 	23 I declare that the information given in this form and
an authorised agent.	accompanying documents is true and complete
If this form is being signed by an authorised signatory, or an authorised agent, the details of the person authorising you must be shown at Question 22.	Please use the Checklot on page 6 of the Notes to make sure you send enerything we have asked for. Signature
2 Applicant details	
First name(t) followed by sumame	93
	Data
	D D M M Y Y Y
	Capacity in which you signed this application (for example, proprietor trustee, company secretary)

Form No. 2

Signature

VAT 2

Status: Point in time view as at 15/08/2009.

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

Regulation 5(1) For official use only Date of receipt Each partner should complete one of the sections below. Please start at the beginning of each line and leave a space between words. Registration No. (where known) Please use BLOCK CAPITALS and write clearly in ink. Full name Home address Postcode Home telephone Mobile telephone National Insurance Number or Tax Identifier in country of origin Signature Date Partner details Home address Postcode Home telephone Mobile telephone National Insurance Number or Tax Identifier in country of origin Signature Date Partner deta Full name Home address Postcode Home telephone Mobile telephone National Insurance Number or Tax Identifier in country of origin Signature Date Partner detai Full name Home address Postcode Home telephone Mobile telephone National Insurance Number or Tax Identifier in country of origin

Date

Please continue overleaf

	Partner details	
5	Full name	
	Home address	
	Postcode	
	Home telephone	Mobile telephone
	National Insurance	Number or Tax Identifier in country of origin
	Signature	Date
	Partner details	
6	Full name	
	Home address	
	Destands	
	Postcode	
	Home telephone	Mobile telephone
	National Insurance	Number or Tax Identifier in country of origin
	Signature	Date
Ξ.	Partner details	
7	Full name	
	Home address	
	Postcode	
	Home telephone	Mobile telephone
	National Insurance	Number or Tax Identifier in country of origin
	Signature	Date
	Partner details	
8	Full name	
	Home address	
	Postcode	
	Home telephone	Mobile telephone
	National Insurance	Number or Tax Identifier in country of origin
	Signature	Date
	Partner details	
9	Full name	
	Home address	
	Postcode	
	Home telephone	Mobile telephone
		Number or Tax Identifier in country of origin
	Signature	Date
/AT 2 n	everse (11/01)	

Form No. 3

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

Regulation 6(1)

Both Parts of this application form must be filled in

Part 1 To be completed by the new owner

date	19
from	(name of previous owner)
	dready returned Form VAT 1, and apply
	<u> </u>
If the application is g	ranted "Uwe agree:
	rest VAT return to Cuntons and Excise for the whole period govered by the
 to send in any retainment 	ums due from but not made by the
on supplies made by	nd fixcise, when asked, any VAT due the previous owner before the business infing any VAT on steeks and assers owner.
	ade in the previous owner's name for a fer date will be regarded as made by
ennerus	
*metus • Char any payment previous owner befor	made by Customs and Excise to the te the reallocation of the registration my right "I/we have to that money.
*metus • Char any payment previous owner befor	re the reallocation of the registration
whetos that any payment previous owner befor number will satisfy a ignature(s)	re the reallocation of the registration

Part 2 To be completed by the previous owner

date -	19
to	
	(hame of new owner)
From that date *1 am/we are no for be registered or *1/we withdraw *n voluntary registration. *1/we agree number shown opposite being allo	ny/our request for to the VAT registration
If the application is granted #1/we a	declare that:
 the new owner will be entitled to which *I/we could have reclaimed had not been transferred 	
 any payment made by Customs: owner will satisfy any right *Dwe i 	
 *I/we have retained stocks and a 	ssets valued at
: including	VAI:
I/we can be contacted at the follow of transfer:	ing whitees after the date
	
· · ·	
Signature(s)	
Signature(s)	
Signature(s)	y secretary, executory

Form No. 4

Regulation 25(1)

Status: Point in time view as at 15/08/2009.

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

HM Customs	e Added Tax Return For the period to	For Officia	l Use		
and Excise			Registration	number	Period
			payable are you will be a financial		the due date
			Due Date:	1	
			For official use D O R only		
scheme for small businesses	ease read the notes on the back and the v ", if you use that scheme. Fill in all boxes of there are no pence write "00" in the pence	learly in ink,	and write 'non	ne' where necessar	y. Don't put a
For official use	VAT due in this period on sales and other	outputs	1	χ	
	VAT due in this period on acquisitions from EC Member States	m other	2		
	Total VAT due (the sum of boxes 1 and 2)	3		
	VAT reclaimed in this period on purchases (including acquisitions from the EC)	and other in	puts 4		
	Net VAT to be paid to Customs or reclaime (Difference between boxes 3 and 4)	ed by you	5		
	Total value of sales and all other outputs e any VAT. Include your box 8 figure	xcluding	6		00
	Total value of purchases and all other input any VAT. Include your box 9 figure	uts excluding	7		00
	Total value of all supplies of goods and re excluding any VAT, to other EC Member S	lated costs,	8		00
	Total value of all acquisitions of goods an excluding any VAT, from other EC Membe		9		00
If you are enclosing	DECLARATION: You, or someone on you	our behalf, m	ust sign belov	w.	
a payment please tick this box.	I,(Full name of		BLOCK LETTE		clare that the
	information given above is true and com				
	Signature				
	A false declar	adon can re	n prose	cution	
VAT 100 (full)	Page 1				PT1 (June 2004)

8

Form No. 5

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

Regulations 23, 25(4)

HM Customs and Excise	Final Value Added Tax Return For the period to	For Official Use	
and Excise		Registration number	Period
			9999
		If your completed return a payable are not received you will be in default and a financial penalty Due Date:	and all the VAT
		For official use D O R only	
cheme for small busine	m please read the notes on the back and the	clearly in ink, and write 'none' where neces	ssary. Don't put a
ash or leave any box biar	nk. If there are no pence write "00" in the penc	e column. Do not enter more than one am £	ount in any box.
For official use	VAT due in this period on sales and other		
	VAT due in this period on acquisitions fi EC Member States	rom other 2	
	Total VAT due (the sum of boxes 1 and	2) 3	
	VAT reclaimed in this period on purchas (including acquisitions from the EC)	es and other inputs	
	Net VAT to be paid to Customs or reclain (Difference between boxes 3 and 4)	ned by you 5	
	Total value of sales and all other outputs any VAT. Include your box 8 figure	excluding 6	00
	Total value of purchases and all other in any VAT. Include your box 9 figure	puts excluding 7	00
	Total value of all supplies of goods and excluding any VAT, to other EC Member		00
	Total value of all acquisitions of goods a excluding any VAT, from other EC Memb		00
If you are enclosing a payment please tick this box.	(Full name information given above is true and co	e of signatory in BLOCK LETTERS)	
	A laise deci	aration can result in prosecution	
VAT 193 (full)	Page 1		PT1 (June 2004)
orm No. 6			

Regulation 5(1)

Application For VAT Registration

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

Please write clearly in black lnk.

cn:s/s/spin/s/s

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

 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)
2. Ellis ille 13/1/2 of ille 3/1/2/21 Taber 17/1/2 (30) 18/2 2/
▎▕▕▕▗▋▗▗▗▄▄▄▄▗▄▗▄▄▄▄ ▄ ▗ ▄ ▗ ▄ ▗ ▎▎▍▎▎ <mark>┆</mark> ┇╎╎╎┆╎╻┷ ╍┢╍ ┷╼┹═┹┈┆┇┆┈┹═┿╾┸╼┻┹┉╬╌╄╴┸╵╵┸┤
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
<u> </u>
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
<u> </u>
8. Has the value of your DISTANCE SALES to customers in the UK exceeded the UK distance seiling threshold at any time in the calendar year commencing 1st January 1993 or any subsequent calendar year?
8. Has the value of your DISTANCE SALES to customers in the UK exceeded the UK distance seiling threshold at any time in the calendar year commencing 1st January 1993 or any subsequent calendar year? YES and Lexceeded the threshold on
time in the calendar year commencing 1st January 1993 or any subsequent calendar year?

 Have you exercised the OPTION TO MAKE THE PLACE OF SUPPLY THE UK, although you have NOT exceeded the UK threshold? (see note 9)
Tick one box
NO Go to 10 EC Country
YES and the option was exercised in on
Please enter the date of your first taxable supply in the UK
10. Do you intend to make distance sales of GOODS LIABLE TO EXCISE DUTY to the UK?
NO Go to 12
YES Please enter the estimated date of your first taxable supply in the UK.
11. (See note 11 - this is VERY IMPORTANT)
I am REQUIRED TO BE REGISTERED from
But I would LIKE TO BE REGISTERED from this earlier date
t2. 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
Σ
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 ane box
Prophetor Partner Director
Company Secretary Authorised Official Trustee (including tax representative)
CD3429/2/N3/1198]

Form No. 7

Document Generated: 2024-06-30

Status: Point in time view as at 15/08/2009.

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

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.

coladaya (1921 Do not detach

1. Enter your FULL NAME, Write in BLOCK LETTERS and leave a space between words
2. Enter your TRADING NAME if it is different from the name entered at 1
3. Enter the address of your PRINCIPAL PLACE OF BUS NESS
of Energine accords of your rainformatic Energy Doorneed
Phone No.
Postcode 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
5. Who is the BUSINESS OWNED by ? (See Note 5 and tick ONE BOX only)
5. Who is the BUSINESS OWNED by ? (See Note 5 and tick ONE BOX only) Sale Proprietor
Sale Proprietor
Sale Proprietor or Partnership Please ensure you ALSO complete form VAT 2.
Sale Proprietor or Partnership Please ensure you ALSO complete form VAT 2. or Limited Company Please enter details from Company Incorporation Certificate below.
Sale Proprietor or Partnership Please ensure you ALSO complete form VAT 2. or Limited Company Please enter details from Company Incorporation Certificate below. Number Date
Sale Proprietor or Partnership Please ensure you ALSO complete form VAT 2. or Limited Company Please enter details from Company Incorporation Certificate below. Number Date Please give details
Sale Proprietor or Partnership Please ensure you ALSO complete form VAT 2. or Limited Company Please enter details from Company Incorporation Certificate below. Number Date Please give details
Sale Proprietor or Partnership Please ensure you ALSO complete form VAT 2. or Limited Company Please enter details from Company Incorporation Certificate below. Number Date Please give details 6. Enter EITHER your BANK SORT CODE and ACCOUNT NUMBER or your GIROBANK ACCOUNT NUMBER
Sale Proprietor or Partnership Please ensure you ALSO complete form VAT 2. or Limited Company Please enter details from Company Incorporation Certificate below. Number Date Please give details or Other Please give details or your GIROBANK ACCOUNT NUMBER 7. Do you use a COMPUTER FOR ACCOUNTING? (See Note 7 and tick one box only) YES NO
Sale Proprietor 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 Please give details 6. Enter EITHER your BANK SORT CODE and ACCOUNT NUMBER or your GIROBANK ACCOUNT NUMBER 7. Do you use a COMPUTER FOR ACCOUNTING? (See Note 7 and tick one box only) 8. Have you made any ACQUISITIONS yet? (This is IMPORTANT - please see Note 8)

VAT 1B

OD 8490/7/45(17/92)

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

Has the VALUE of your ACQUISITIONS from persons in other EC countries exceeded the registration limit at any time in the calendar year commencing 1st January 1993 or any subsequent calendar year?
Yes and I exceeded the threshold on I I I
because the value of my acquisitions from 1st January amounted to $\ \Sigma$
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
Lam required to be registered from
But I would like to be registered from this earlier date Go to 12
11. Lam 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
YES Please enter the ESTIMATED VALUE OF TAXABLE SUPPLIES you have made in the last 12 months £
you have made in the last 12 months £
you have made in the last 12 months £
you have made in the last 12 months £ NO Do you wish to request EXEMPTION from registration because all your acquisitions are ZERO-RATED?
you have made in the last 12 months £ NO Do you wish to request EXEMPTION from registration because all your acquisitions are ZERO-RATED? Yes and my zero-rated acquisitions amount to £
you have made in the last 12 months £ NO 13 De you wish to request EXEMPTION from registration because all your acquisitions are ZERO-RATED? Yes and my zero-rated acquisitions amount to £ No
you have made in the last 12 months NO Do you wish to request EXEMPTION from registration because all your acquisitions are ZERO-RATED? Yes and my zero-rated acquisitions amount to No 14. Declaration
you have made in the last 12 months £ NO 13 Do you wish to request EXEMPTION from registration because all your acquisitions are ZERO-RATED? Yes and my zero-rated acquisitions amount to £ No 14. Declaration [Full Name in BLOCK LETTERS]
you have made in the last 12 months £ NO Do you wish to request EXEMPTION from registration because all your acquisitions are ZERO-RATED? Yes and my zero-rated acquisitions amount to £ No 14. Declaration I
you have made in the last 12 months NO
you have made in the last 12 months £ NO 13 De you wish to request EXEMPTION from registration because all your acquisitions are ZERO-RATED? Yes and my zero-rated acquisitions amount to £ No 14. Declaration I (Full Name in BLOCK LETTERS) declare that all the entered details and information in any accompanying documents are correct and complete Signature Tick one box

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

Nam	e					
1.	Partnerships partners (par	ors - please give your ful - please give your tradin tnerships must also com unincorporated bodies -	g name. If y	VAT 2).	,	
2.	Do you have	a trading name?	,	Yes	No	
	Please give t	he trading name of the b	usiness.			
Busi	ness address	·				
3.	Please give t	he address of your princi	ipal place o	f business.		
	Postcode		Pt	none number		
			Fa	ax number		
Tax	representativ	8				
4.	•	ppointed a tax represent	ative to dea	al with your VAT m	natters in the UK	please give
	Name					
	Address					
				Phone number		
	Postcode			Fax number		

IB(March 2000)

Document Generated: 2024-06-30

Statu	ıs	
5.	What is the structure/legal status of the	business? (Please tick)
	Sole proprietor	Partnership
	Corporate body	(Please give your company incorporation details)
		Certificate number Date
	Unincorporated body	Please give details
Busi	ness activities	
6.		o do? Tell us about your current or intended business activities.
1		
(
	k details	
7.	Please give your UK bank details or you	ur tax representative's bank details.
	Sort code	Account number
		or
	No bank account (please tick)	Girobank account number
Com	puter accounts	
8.	Is your accounting system computerised	d?
	Yes (Give details below)	No
	Computer type	
	Software	Version
Rele	vant supplies	
9.	Have you made any relevant supplies y	et? (Please tick one box)
	Yes, I made my first relevan	t supply on
	No, but I expect to make my	first relevant supply on
VAT1	C	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?
	£
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.
Exer	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	er 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)
VAT1	C (B(March 2000)

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

Declaration 16. I declare that the information given on this form and contains the	ained in any accompanying document is true and
complete. Signature	Date
Full name	
What is your position in the business? (Please tick)	
Proprietor Partner	Director
Company Secretary Trustee	Other
	If "Other", give details
Checklist	
 Have you answered every question? Have you signed the form? Partnership? Remember to complete Form VAT 2 Appointing a tax representative? Remember to complete 	Form VAT1TR
What to do next	
When you have completed and signed the form, please send it is Notice 700/4 Registration for VAT: Non-established taxable person please contact the Registration Unit.	to the VAT Registration Unit specified in VAT sons. If you have any problems completing the
Usually we will register you and give you a VAT registration num form, provided you have given all the necessary information.	nber within 15 working days of receiving your
For office use	
Local office code and registration number	D M Y Stagger Status
Name	Trade classification Taxable turnover
Trade name	
Rept. Vol address user Div Intg. Overseas Intg. EC Valu	ue of Sales to EC Value of Purchases from EC

Form No. 8

VAT1C

Approved - Initial/date Refused - Initial/date

Form issued - Initial/date

VAT9/ other

IB(March 2000)

Letter

Approval letter

VAT8

Appointment of Tax Representative	4. Declaration			
You should read the notes in the registration booklet "Should" be registered for VAT? - Distance Selfing" which will help you to answer these questions. Please write clearly in black link.	W6,	(Full name of PRINCIPAL in BLOCK LETTERS)	8m2	
 Who is the business owned by? Please give the persons full name and address of the principal place of business. 	is was a second of the second	i E	OOK (FITERS)	
	declare that all the entere	red details and information is	declare that all the entered details and information in any accompanying documents are correct and complete	
	Signature of Principal Tick one box		Signature of Principal	
Phone No. Phone No. Phospace give the VAT Registration number in EC country of origin	Proprietor .	Partner	Director	
Please give the UK VAT Registration number (if amy)	Company Secretary	Authorised Official	Trustee	
Enter the full name and address of the UK Tax Representative	Signature of Tax Representative		Date	
	Tack one box Proprietor	Partner	D rector	
Phone No. Phone No. Postcode 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	Compary Sebretary	Authorised Official	Trustee	
registration number (if any) Date of appointment VAT Registration number	CD M73M911/M81			Regulation 10

Form No. 9

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

Regulation 191(1)

VAT 65A

ab Amerika	ls if	ns your test application? If not, please glue arance No.
	ш	
H M Customs and Excise	Γ.	HM Customs and Excise VAT Overseas Repayments 8th/13th Directive Custom House APPLICATION by a business person not established in the Community for
authority to which the		PO Box 34 REFUND OF
application		LONDONDERRY BT49 7AE VALUE ADDED TAX Value ADDED TAX (Please read the explanatory notes
is addressed	<u>_</u>	Northern Ireland before filling in)
	l	House number and street name
	1	Place, country and post code
	2	Nature of applicant a business
	3	Particulars of the Official Authority and teactualness Registration No. In the country in which the applicant is established or has his her domicile or normal place of realizance
	4	Periodi lo which the application refers Month Year Month Year
	6	Total arrount of refund requested (in Hyures)
	6	The applicant requests the refund of the amount shown in heading 5 in the manner described in heading 7
(*) Insert x in the		Method of sethement requested (*) Bank apopunk Postal account
appropriate box		Account number of financial body Account number of financial body
	7	Name and address of the financial body.
	l	
	١ <u>.</u>	
	B	No, of documents endosed
	l	The applicant hereby declares (a) that the goods or services specified overteat were used for the following business activities in the United Kingdom
	ļ	to send full formand it formand i tilled formandel annon annonen menerolana annonen annonen annonen annonen an
	9	(b) that in the United Kingdom during the period covered by this application, he/she engaged in
		in o supply of goods or services
(*) Insert x in the		(*) only the provision of services in respect of which tax is payable solely by the person to whom they are supplied
appropriale box		(*) only in the provision of certain exempted transport services ancillary thereto
		(c) that the particulars given in this application are true
		The applicant undertakes to pay back any monles wrongfully obtained
		At (Pisce) (Date) (Signature)
		NOTE: Box 10 everleaf MUST be completed
VAT 65A	o	D 007457482011\$4) Page 1.

Statement Itemisting VAT amounts relating to the period covered by this application

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

- Refunds of tax incurred may only be claimed subject to the rules of the United Kingdom. Brief details of supplies on which tax cannot be rectained are given in HM Customs and Excise Notice 723. Tax incurred on the following supplies also will not be refunded.

 (a) supplies of goods which have been or are about to be exported; and supplies to travel agents which are for the direct benefit of travelors. Under this scheme the term "travel agent "includes rour appraished 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 law refund applied for	FOR OFFICIAL USE ONLY
			-	TOTAL B/F	
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		Pa	,e3 TOTAL	•	

CD 00745/NB(01/84)

Form No. 10

Status: Point in time view as at 15/08/2009. Changes to legislation: There are currently no known outstanding effects for

the The Value Added Tax Regulations 1995. (See end of Document for details)

Regulation 191(1)(b)



Certificate of Status of Business Person

The undersigned(Na	me and address of official authority)
certifies that	(Name of business person)
	(Nature of activity)
	(Address of the Establishment)
is a registered business person	in(Name of country)
*his registration number being	
Date	
	Signature
Office date stamp	
	(Name and grade)
*If the applicant does not have state the reason for this.	a registration number, the official authority should
VAT 66A CD 3298/N5(D7/92)	F 86091)

[F5Form No. 11A: VAT refunds for DIY housebuilders - Claim form for new houses]

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

Regulation 201(a)



VAT refunds for DIY housebuilders Claim form for new houses

₩ Custoriis	Claim form for new nouses
	Official use only Claim reference number
claim back the VAT you have paid on building materials used im form. The information you give at part B will show us whe at came with this claim form. If you are not sure how to answ	ether you are eligible to claim back the VAT. Refer to the notes
A Personal details Answer all the questions in this part. If you leave any answer blank we may reject your claim Your full name, including your title Mr, Mrs, Miss, etc. If a charity, name of charity for whom the building has been constructed	B Are you eligible to claim? Refer to the guidance notes 9 Is the property that you have built a new build? By new build we mean a building that has been constructed from scratch which does not incorporate any part of an existing building No. Yes
2 If more than one claimant, title and full name of other claimant(s)	10 Is your claim for the fit out and finish of a building shell? No Yes If you have answered No to questions 9 and 10 you will not be eligible to claim
Your daytime contact phone numbers Your address	Has the work been done on a completed dwelling purchased from a developer, builder or private vendor? No Yes If Yes, you are not eligible to claim
Postcode Is this the building you are claiming for?	Has Planning Permission been granted for your new build: To obtain a VAT refund you must provide evidence that the works are lawful and send to us a copy of the Planning Permission
No Yes S 5 Your National Insurance number	Do the terms of your Planning Permission (or similar permission) prevent the separate disposal, or separate use of the new building from any other pre-existing building? No Yes
6 Certified date of completion for the building If you do not have a completion certificate leave blank DD MM YYYY 7 Date you occupied the building	Has a Building Regulation Completion Certificate been granted by the local authority or by an approved inspector registered with the local authority building control? No Yes If No, give details about what you will be providing instead
B If you or anyone connected with this claim have an interest or association with a VAT registered business, enter the VAT registration number(s) below:	
	age 1 HMRC 05/0

Details of the property that has been constructed e of building example, a house, bungalow, apartment/flat, etc. the building detached, semi-detached, terraced? Inber of storeys Inber of reception rooms Inber of bedrooms Inber of bathrooms/en-suites Inber of kitchen/utility rooms
nber of storeys nber of reception rooms nber of bedrooms nber of bathrooms/en-suites
ere are other rooms not described above, tell us ho ny there are and describe their purpose below
w many garages do you have (or intend to have)? Inber of integral Inber of detached I you be occupying it/them with the property you constructing? Yes Yes O, explain what you will be doing with them

Page 2

VAT431NB

Document Generated: 2024-06-30

Details of the goods supplied to you for which you will be claiming back VAT where the VAT amounts are shown separately on the invoice Remember, you can only claim for building materials and you must send in the original invoices. The invoices should be in your name. If they are not in your name, you must explain why. For further advice about how to complete this part, refer to the notes.				
Reference/ invoice number	Date of invoice	Description of invoice item	Supplier's name	VAT paid

Reference/ voice number	Date of invoice	Description of invoice item	Supplier's name	VAT paid
			Balance brought forward	

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where VAT Remember, y The invoices s	amounts are not shou can only claim for b should be in your name	pplied to you for which you will be claiming back VAT at the standard rate e not shown separately on the invoice aim for building materials and you must send in the original invoices. our name. If they are not in your name, you must explain why. w to complete this part, refer to the notes.		
Reference/ invoice number	Date of invoice	Description of invoice item	Supplier's name	Total paid
invoice number				
		Total paid		
		E Total VAT	calculated see notes	

Reference/ voice number	Date of invoice	Description of invoice item	Supplier's name	Total paid
			Balance brought forward	
		Total pa		

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

			Claimant: enter your full name here
	F Sending in your claim Summary, checklist and declaration		If any of the invoices have not been made out in your name, explain why in the box provided below
21	Summary To check what is needed here, refer to the notes		
	Total amount of VAT claimed from part D		
	£ .		
	Total amount of VAT claimed from part E	24	Do you give your authority for us to discuss your clair with your agent or accountant?
	£		HHSIQ—CISISHH— CISISISHH SISISISISISHH
	Total amount of VAT to claim back from parts D + E		No Yes If Yes, give details of your agent or accountant here
	£		is tex, give details or your agent or accountaint neve
22	Bank account details Give us details of the account into which you would prefer us to send your VAT refund Full name(s) of account holder(s)		
	ros namejs) or account noticer(s)		
		25	Declaration
	Sort code		If you give incomplete or inaccurate information in
			this claim, we may charge you a financial penalty or prosecute you.
	Account number		I declare that:
	Must be at least 8 digits. Lead with zeros if less		 I am only reclaiming VAT which was correctly charge to me and which I paid on goods I bought or imported from a VAT registered supplier
23	Checklist		 all the details and information on this form and any accompanying documents are correct
	Make sure you send all documents as requested to help		I have read the attached guidance notes.
	us deal with your claim quickly. If you do not provide us with the correct documents we may reject your claim.		VAT registered persons
	Have you enclosed the following documents?		I confirm no other claim has been or will be made for
	Full Planning Permission No Yes		these supplies and where the purchase of goods has been invoiced to my VAT registered business, I have no
	Or		and will not claim this VAT through my VAT return.
	Outline Planning Permission and		Charity builders
	Approval of Reserved Matters No Yes Note: both documents are needed		The building being claimed for is to be used solely for the purpose of the charity named in question 1 of this
	And		claim form.
	Completion Conflicts on		Signature(s)
	Completion Certificate or other acceptable evidence No Yes		
	A full set of building plans No Yes		
	Original invoices filed in the same		
	order as listed on the schedules No Yes		
			Date DD MM YYYY

[F5Form No. 11B: VAT refunds for DIY housebuilders - Claim form for conversions]

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



VAT refunds for DIY housebuilders Claim form for conversions

A Personal details Answer all the questions in this answer blank we may reject you 1 Your full name, including your titl	part. If you leave any ur claim	er a question, phone the Helpline on 0845 010 9000 . B Are you eligible to claim? Refer to the guidance notes 9 Have you converted a non-residential building? By conversion we mean converting a non-residential
2 If more than one claimant, title at other claimant(s)		No Yes 10 Have you carried out works to a building that has previously been lived in?
3 Your daytime contact phone num	bbers	No Yes 11 Have you got evidence that the building has been em for 10 years or more before works started? No Yes 16 No, you are not eligible to claim
4 Your address Postcode		12 Are you 'fitting out or finishing' a converted non-residential building? No Yes 13 Has work been done on a completed dwelling purchar from a developer, builder or private vendor?
Is this the building you are claiming	ng for?	No Yes If Yes, you are not eligible to claim
Your National Insurance number Certified date of completion for the National Nationa		14 Has Planning Permission been granted for your conversion/renovation/alteration works? To obtain a VAT refund you must provide evidence the the works are lawful and send to us a copy of the Planning Permission No Yes If No. explain the reason why below
7 Date you occupied the building 8 If you or anyone connected with interest or association with a WAT enter the WAT registration number	DD MM YYYY this claim have an registered business,	

15 Do the terms of your Planning Permission (or similar permission) prevent the separate disposal, or separate	C Details of the property that has been converted
use, of the converted property from any other pre-existing building?	20 What was the building before you started your works?
No Yes	Type of building
16 Has a Building Regulation Completion Certificate been granted by the local authority or an approved inspector registered with the local authority	For example, barn conversion, house, apartment/flat, et
building control?	is the building detached, semi-detached, terraced?
No Yes IIII If No, refer to notes and give details about what you will be providing instead	Number of stores
	Number of storeys Number of reception rooms
	Number of bedrooms
	Number of bathrooms/en-suites
17 Have you got your approved plans from your Local Authority?	Number of kitchen/utility rooms If there are other rooms not described above, tell us how
No Yes	many there are and describe their purpose below
18 Are you intending to live in the property you are claiming for?	
No Yes	
If No, provide the address of the conversion and explain why you have carried out the works	
	21 How many garages do you have (or intend to have)?
	Number of integral Number of detached
19 Are you claiming for any other building(s)?	22 Will you be occupying it/them with the property you are converting?
No Yes If Yes, give details about the other building(s) and	No Yes
explain why	If No, explain what you will be doing with them
ontinue to complete the rest of this claim form only if you ave answered questions 9 to 19, have checked the notes	

Document Generated: 2024-06-30

where the N Remember, you If they are no	ails of the goods and services for which you will be claiming back VAT are the VAT amounts are shown separately on the invoice ember, you must send in the original invoices. The invoices should be in your name. by are not in your name, you must explain why. arther advice about how to complete this part, refer to the notes.				
Reference/ woice number	Date of invoice	Description of invoice	item	Supplier's name	VAT paid
					-
					-
					-
					-
				D Total	

D Details of the Where the V	he goods and servi VAT amounts are sl	ces supplied to you for which y nown separately on the invoice	ou will be claiming back VAT Continued	
Reference/ invoice number	Date of invoice	Description of invoice item	Supplier's name	VAT paid
			Balance brought forward	

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Reference/ Dinyoice number	Date of invoice	Description of invoice item	Supplier's name	
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Status: Point in time view as at 15/08/2009.

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

Reference/ invoice number	Date of invoice	Description of invoice item	Supplier's name	Total paid
invoice number			Balance brought forward	

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Status: Point in time view as at 15/08/2009.

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

			Claimant: enter your full nar	ne here
at the reduce Remember, you If they are not	ails of the goods and services for which you will be claiming back VAT he reduced rate where VAT amounts are not shown separately on the invoice tember, you must send in the original invoices. The invoices should be in your name. bey are not in your name, you must explain why. further advice about how to complete this part, refer to the notes.			
Reference/ invoice number	Date of invoice	Description of invoice item	Supplier's name	Total paid
				-
				-
				-

Page 7

VAT431C

Document Generated: 2024-06-30

Status: Point in time view as at 15/08/2009.

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

at the redu	ced rate where VA	ces for which you will be claim I amounts are not shown sepa	rately on the invoice Continu	ed
Reference/ invoice number	Date of invoice	Description of invoice item	Supplier's name	Total paid
			Balance brought forward	
		Total pa	aid	

					Claimant: enter your full name here
	G Sending in your claim				If any of the invoices have not been made out in your
	Summary, checklist and declarat	ion			name, explain why in the box below
	£				
25	Summary To check what is needed here, refe	r to the note	es		
	Total amount of VAT claimed from				
	£ .				
	Total amount of VAT claimed from	parte			
	£				
	Total amount of VAT claimed from	part F		26	Do you give your authority for us to discuss your claim with your agent or accountant?
	£				with your agent of accountant:
	Total amount of VAT to claim back	from parts I	D+E+F		No Yes
	£ .				If Yes, give details of your agent or accountant here
	A				
24	Bank account details				
	Give us details of the account into	which you w	vould		
	prefer us to send your VAT refund				
	Full name(s) of account holder(s)				
	Sort code			27	Declaration
					If you give incomplete or inaccurate information in this claim, we may charge you a financial penalty or
	Account number				prosecute you.
	Must be at least 8 digits. Lead with	zeros if less	s		I declare that:
					 I am only reclaiming VAT which was correctly charge
					to me and which I paid on goods/services I bought o imported from a VAT registered supplier
25	Checklist				· all the details and information on this form and any
	Make sure you send all documents as requested to help us				accompanying documents are correct I have read the attached guidance notes.
	deal with your claim quickly. If you us with the correct documents we				Thave read the attached guidance notes.
	Have you enclosed the following d		Con Control		VAT registered persons
	Evidence that the building has				I confirm no other claim has been or will be made for these supplies and where the purchase of goods has
	been empty for 10 years or more				been invoiced to my VAT registered business, I have no
	before you started your works	No	Yes		and will not claim this VAT through my VAT return.
	Full Planning Permission	No	Yes		e
	Or				Signature(s)
	Outline Planning Permission and				
	Approval of Reserved Matters	No	Yes		
	Note: both documents are needed				
	And				
	Completion Certificate or other acceptable evidence	No	Yes		Data DD MM 1000V
	and the part of the same of th				Date DD MM YYYY
		No	Yes		
	A full set of building plans				
	A full set of building plans Original invoices filed in the same				

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

M Customs and Exerce	GED . L	Reg stration Number	anch/subsidiar Identifie
Γ		be liable to a financial penalty apleted listing is not received a date.	Carendar Quarter
	atelephone number isin this form please read the notes overleaf.	For official use D O R only	
Cauntry	Customer's VAT Registration Number	Total value of supplies	indi n (cato
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	i pages completed	(this page on	ly) · · ·
	(Full rame of signalory in BLOCK LETTERS:	., ,.,,d	oclare that the
	(Full name of synalory in BLOCK LETTERS: given above and on any continuation sheets is true and comp		
		Date	19

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

Regulation 22(6), 23



New Means of Transport

Ref	

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

and Inches	
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	
1	Telephone
	Vat Registration No. GB
Telephone	Details of the New Means of Transport
Permanent/Temporary (Delete as applicable)	
Full address in Member State of Destination	Motorised Ship Aircraft Land Vehicle (Tick as applicable)
	Make
	Model
Talephone	Colour
Permanent/Temporary (Delete as applicable)	Registration No.
Are you: a UK Resident? an overseas visitor?	Engine No.
	Chassis/Hull/Alrframe No.
(Tick one box)	Invoice No. and date
Are you a serving member YES/NO	Date of Supply
Are you a serving member YES/NO of HM Forces?	Purchase Price
Member State of destination of the New Means of Transport in which VAT will be paid	VAT not paid at time of supply
Declare that:	
 I have read notice 728 and the notes overleaf; 	I Declare That:
 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; 	 the New Means of Transport described above complies with the definition given in notice 725 about VAT and the Single Market
• I intend to notify the fiscal authority in that Member State and pay any tax due;	the information given above is correct
• 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	Signature Date
will become due; The information I have given above is correct.	Status; Próprietor/Partner/Director/Company Secretary/Authorised Person (Detrite as applicable)
_	
Signature	
Date	
VAT 411 (Customs Copy) Page 1 Policia	5 1995i

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

Regulation 204(c)



Value Added Tax Flat Rate Scheme for Agriculture Application for Certification

ard	Bridge T
1	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)
''	The desired four forest with a first second certification (easier to the first second certification)
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)
4.	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
Э.	SERVICES which you expect to make in the next 12 months. (See note 5)
_	
₿.	Please enter the DATE from which your CERTIFICATE TO BE SEEECTIVE (See note 6)
	TO BE EFFECTIVE. (See note 6)
7.	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 :
	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
	Tick one box Proprietor Director Trustee
	Partner Company Author/sed Secretary Official
_	For Official Use
	Initials and Date
All'd	
Ref VA1	
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			Regulation 178(1)(a)
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H M Cusioms and Excee	1	[400104704
			APPLICATION by a business person
Competent	-	esi	ablished in the Community for
authority to which the			REFUND OF VALUE ADDED TAX
application is addressed	1_	{P*e	ese read the explanatory notes before filling in)
		"-	ociore filling ()
	_	Forenames and surname or hame of firm of applicant	
	1.	House number and steet harns	
	1	Pisce, country and post code:	~ ~~
	<u> </u>	Nature of applicant's business	- 4-k -4-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-
	1.2	Pankollais of the Office: Authority and taxteus riess Registration No. in the country in which the applicant is as	daaliehuul ar lage trioflare ebneiota ar
	3	Particulars of the Company and have as hear registration from the country in which the expansions is an armal place of residence	adistisci di Fras (-es) ke Pikiradi e d
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	ļa	Period to which the application refers	Month Year Month Year
	5	Total amount of refood requested (in ligures) green overlast for termined (st)	
	6	The applicant requests the roland of the amount shown in heading 6 in the manner describes in heading 7	
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appropriate		Account number of timencial bo	dy
box	!	Account in the name of	1 1
	7		.1. 1 -
	ļ ') Name and address of the financial body	-3. 1- h
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		; •	
	B	No. of documents enclosed	ertz
		The applicant hereby declares [(a) that the goods or services specified overless were used for the following business active.)	vites in the United Kinodom
		1	
	9	(b) that in the United Kingdom during the period dovered by this application, he/she engag	EX1 ::
		(*) Indispiply of goods or services	j
(*) langet x	-	(2) only the provision of services in respect of which tax is payable sulely by the	e person to which they are supplied
in the sopropriate		[] Only in the provision of certain exempted transport services and any theret	,
box		(c) that the particulars given in this application are true	
		The septicant undertakes to pay each any innoise wrongfully obtained	
			I
		At	gnature)
		NOTE: Box 10 overleaf MUST he completed	/
		Page I.	

POD (May 1995)

VAT 65

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

$\fbox{10}$ Statement item(sing VAT amounts relating to the period covered by this application

- 1) 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.
- You are reminded that when tax is incurred by faxable 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 carbicate must also contain the names of those group members who incurred the tax.

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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VAT 56 1R (06/95)

- 3) Refunds of tax incurred may only be claimed aubject to the rules of leach state. Brief details of supplies in each mainter state on which tax cannot be reclaimed are given in HM Customs and Excise Notice 723. Tax incurred on the following supplies without be refunded by any member state:
 - (a) supplies of goods which have been or are about to be exported; and
 - (b) supplies to travel agents which are for the direct benefit of travellers. Under this scheme the term "travel agent" includes tour operators or any person who purchases or re-supplies services to travellers.

Number	Nature of goods or services	Name, VAT Registration No. (if known) and address of supplier of goods or services	Date and number of rivolce or import document	Amount of tax refund tor	FOR OFFICIA USE ONLY
		TOTAL B/F			
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VAT 66 (0595) Page 3.

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

Regulation 178(1)(b)(i)



Certificate of Status of Taxable Person

he undersigned	
	/Name of level YAT office)
	(Name of local VAT office)
Name of taxable person	-
Address	
	.,
Nature of activity	
a taxable person for the purpo	sees of Value Added Tax, whose Registration number is
ate	-
Office stamp	
	Signature
	(Name and grade)
	(wante and Grade)
AT 66 CD 1017/NR/07/90)	F.50371

 $\mathsf{I}^{\mathsf{F6}}\mathsf{Form}\,\mathsf{No}.$ 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

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

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

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

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

[F7SCHEDULE 1A

Regulation 145F

Textual Amendments

F7 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 1 to 5 above which the Commissioners may require in respect of the relevant fiscal warehousekeeper.

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

(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

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

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 15/08/2009.

Changes to legislation:

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