Charity VAT Exemption Form



If you are in any doubt as to whether you are eligible to receive goods or services zero-rated for VAT you should consult Notice 701/7 VAT reliefs for disabled people or contact our National Advice Service on 0845 010 9000 before signing the declaration.

Section 1: To	o be complet	ted by the charity	1			
I (full name and st	atus in charity):					
of (name and add	ress of charity):					
	harity named abov bled person: (des		y Systems Distribution	Ltd the followin	g goods which are made	
or the following available: (descrip		goods to suit the con	ditions of a disabled	person to who	om the goods are made	
or the following se	ervices of installation	on, repair maintenance of	goods on behalf of a c	lisabled person:	(description of goods)	
and I claim relief f	rom Value Added T	āx.				
	Signature:		Date:			
Section 2: To	be complet	ed by the supplie	er			
I (full name):	Safety System	s Distribution Ltd				
of (address):	Unit 11B Hobs	Unit 11B Hobson Industrial Estate, Burnopfield, Newcastle, NE16 6EA				
am supplying to	the charity name	ed above:				
for the use of th	e disabled perso	n.				
	Signature:		Date:			