Ref: CI4.30a (09/17)



Unit 6C Thorpe Drive Banbury Oxfordshire OX16 4UZ

Tel: 01869 365500 Fax: 01869 365588

Email: sales@chilterninvadex.co.uk

Dear Sir/Madam

# VAT Relief for disabled people Eligibility declaration by a disabled person

Please find attached a copy of our VAT exemption declaration. Completion of this form allows the VAT element to be removed from your purchase/installation cost.

You must only complete the declaration if your disability or sickness entitles you to claim VAT relief as defined by HMRC and the goods are being purchased for your own domestic or personal use. Details of where to obtain additional information are provided on the form attached.

If you are sure that VAT exemption applies, please complete Part 2 and return the entire form to us at the address above or by email to sales@chilterninvadex.co.uk. Please note that where the completed form is returned by email, it must come from the email address of the signatory. This is a requirement of HM Revenue and Customs.

The form may be completed by a carer where necessary.

The HMRC requires us to add VAT to the final invoice where a completed form is not held on file by us. As such, where VAT relief is applicable it is important that this form is returned to us as soon as possible.

Please note that the information requested in this form is for the use of recording only, as requested by HMRC. It is subject to data protection regulations and will not be used for marketing purposes or passed to other third party organisations.

Yours faithfully

For and on behalf of Chiltern Invadex (UK) Limited











Part 1. S	qqu	lier
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### Note to supplier

The production of this declaration does not automatically justify the zero rating of your supply.

You must ensure that the goods and/or services you are supplying qualify for zero rating. Please consult Notice 701/7 VAT reliefs for disabled people, before applying VAT relief to your supplies.

You must keep this declaration with your records for production to your VAT officer as required. Please do not return it to the customer or send it to HM Revenue and Customs (HMRC).

I, Mark Benyon (Managing Director) of, Chiltern Invadex (UK) Limited Unit 6C Thorpe Drive Banbury Oxfordshire **OX16 4UZ** 

I am supplying the following goods and/or services to the disabled person named overleaf.

Please tick the appropriate box and give details of the goods and/or services in the space provided:

✓		Details
	Supply of equipment for the customers personal use	☐ Shower Chair / Cradle / Trolley / Stretcher
		☐ Bath / Cubicle / Enclosure
	Installation of equipment	☐ Hoist / Sling
		Details:
	Service, maintenance or repair of equipment	

## **Invoice or O/A Number**

Signed	<b>Date</b> 11 April 2019
pp M Benyon (for and on behalf of Chiltern Invadex (UK) Limited)	

Author

#### Part 2. Customer's declaration

### Note to customer

You should complete this declaration if you are 'chronically sick or disabled' and the goods or services are for your own personal or domestic use. A family member or carer can complete this on your behalf if you wish.

You can find out more from the Helpsheets on the GOV.UK website or by telephoning the VAT Disabled Reliefs Helpline on Telephone: 0300 123 1073.

HMRC staff cannot advise whether or not an individual is chronically sick or disabled.

A person is 'chronically sick or disabled' if he or she is a person:

• with a physical or mental impairment which has a long term and substantial adverse effect upon

his or her ability to carry out everyday activities

with a condition which the medical profession treats as a chronic sickness

It does not include an elderly person who is not disabled or chronically sick or any person who is only temporarily disabled or incapacitated, such as with a broken limb.

If you are unsure, you should seek guidance from your GP or other medical professional. Please give this completed form back to the supplier. They will keep it with their VAT records. Please do not send it to HMRC.

I, (full name)		
Of (address)		
declare that I have the following disability or chronic si	ckness	
I am receiving the goods and/or services detailed domestic or my personal use and I claim relief from V/		pplied to me for
Signed User or Representative (please select)	Date	
A typed signature can be accepted if accompanied by	ov an email from the signatory	This provides

confirmation of signature origin and is a requirement of HM Revenue and Customs.

M Adamou

Author