Vat Exemption Certificate 

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| Goods and services for disabled persons: Eligibility declaration by an individual | |
| (Full name) Of (address):  Postcode:  Telephone: | |
| I declare that I am chronically sick or disabled by reason of: (give a full and specific description of your condition) | |
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| and that I am receiving from: Easylink UK   * The following goods which are being supplied to me for domestic or my personal use:   (Description of goods) | |
|  | |
| * The following services to adapt goods to suit my condition: (description of services and goods) | |
|  | |
| * The following services of installation, repair or maintenance of goods: (description of   services and goods) | |
|  | |
| And I claim relief from value added tax under Group 14 of Schedule 5 to the Value Added Tax Act 1983. | |
| Signature or E-mail address | Date |
| Warning: Section 39.2. of the VAT Act 1983 provides for severe penalties for anyone who makes use of a document which they know to be false for the purposes of obtaining VAT relief.  **Please Note: This form must be returned within 30 days of date of invoice in order to claim your VAT**  VAT EXEMPTION CERTIFICATE  Office Use Only  Sales order number:  Return the completed form to:  Medpage Limited T/A Easylink UK  3 Melbourne House  Corby Gate Business Park  Corby  Northants  NN17 5JG  Fax 01536 269 719  Email: sales@easylinkuk.co.uk | |