## Complete Solutions for Caring Professionals

## VAT EXEMPTION CERTIFICATE

I (Full Name)	
Of (Address)	
Declare that:	
I am / they are - chronically sick or have a disablir	ng condition by reason of:
(	); and that
I am receiving from: Protec Healthcare Products L	td
$^{\ast}$ the following goods which are being supplied to	me for domestic or my personal use:
$\ensuremath{^*}$ the following services to adapt goods to suit my	condition:
(	)
$^{\ast}$ the following services of installation, repair or m	aintenance of goods:
(	)
$^{\ast}$ the following alterations to my private residence	2:
(	)
and I claim relief from value added tax.	
(Signature)	
(Print)	
(Date)	

## IMPORTANT VAT Information

By selecting a VAT exemption option and completing the details you are declaring that you are claiming VAT exemption under Group 12 of Schedule 8 of the Value Added Tax Act 1994. PLEASE NOTE THAT IT IS AN OFFENCE TO MAKE A FALSE DECLARATION. The Information above is kept strictly confidential and not shared. It is only used for the company application of VAT Relief and for the VAT accounting purposes of the UK Government HMRC.

Once this form is completed please email to Accounts@protec.uk.com