

# 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 The National Advice Service on 01204 374 930, before signing the declaration.

Please fill in  
your details

## Personal Details

I (Full Name): \_\_\_\_\_

Address: \_\_\_\_\_

Postcode / Zip Code: \_\_\_\_\_

Tel. No. for enquiries: \_\_\_\_\_

Invoice Address (if different): \_\_\_\_\_

Declare that: I am chronically sick or have a disabling condition by reason of (give full and specific description of your condition): \_\_\_\_\_

and that I am receiving from BES Healthcare Ltd the goods described on Invoice/Sales Order no: \_\_\_\_\_ which are being supplied to me for domestic or my own personal use and I claim relief from added value tax.

Signature: \_\_\_\_\_

Date: \_\_\_\_\_

## Terms and Conditions of Sale – October 2018

- 1. Prices:** Prices may be altered without prior notice.
- 2. Terms:** All merchandise remains the property of BES Healthcare Ltd, until paid for in full. Payment terms, including overdue charges, will be specified on invoice.
- 3. Shipping:** Goods will be supplied with carriage charged extra.
- 4. VAT:** VAT will be charged at the current rate unless an exemption form has been submitted with order.
- 5. Returns:** All returns are subject to a 15 % restocking charge plus all applicable freight costs (excl. Private Individual purchases). Merchandise may not be returned without the prior authorisation of BES Healthcare Ltd. All claims for damage or shortages must be made within 7 days of receipt.

