



VAT EXEMPTION DECLARATION FORM

Personal details
Name
Delivery address
Postcode
Telephone number
Email address
VAT Declaration
<p>I, (insert name), of the above address, declare that I am an eligible person under paragraph 4a of VAT 701/7/94, that I am chronically sick or disabled and that I am receiving from PAUL HARTMANN Ltd, Heywood Distribution Park, Pilsworth Road, Lancashire, OL10 2TT, VAT No 362 3417 68, incontinence products for my personal use, and claim that the supply of these goods is eligible for relief from Value Added Tax under Group 12 of the Zero Rated Schedule to the Value Added Tax Act 1994.</p> <p>Signature: Date:</p> <p>There are severe penalties for making a false declaration. If you are in any doubt about your own eligibility of the goods you are buying, you should get advice from any local VAT office before signing this declaration.</p>

Please send this form by post to: PAUL HARTMANN Ltd, Heywood Distribution Park, Lancashire, OL10 2TT. Or by fax to: 01706 363201.

Please ensure your email address is included on the form.