

DECLARATION TO CLAIM RELIEF UNDER THE VAT ACT 1944, SECTION 30 NOTICE 701/7



CHARITY NAME:

ADDRESS:

.....

CHARITY REGISTRATION NO:

NAME OF CLIENT:.....

ADDRESS.....

.....

.....

MEDICAL CONDITION:



We as a charity are receiving from Recare Ltd the goods mentioned attached. These goods are being supplied to us for domestic or personal use, for our charity or a charity member.

SIGNATURE: **DATE:**

THIS FORM MUST COMPLETED AND RETURNED TO RECAR LTD FOR THE PURPOSES OF VAT. IF THERE IS ANY DOUBT ABOUT YOUR ELIGIBILITY TO RECEIVE GOODS ZERO RATED VAT YOU MUST CONSULT NOTICE 701/7 VAT RELIEFS FOR DISABLED PEOPLE. IF YOU NEED ASSISTANCE WITH THIS, CONTACT THE NATIONAL ADVICE SERVICE ON 084650109000 PRIOR TO SIGNING THE DECLARATION.

Recare Ltd is the trading name of Recare Ltd, (Registered in England No: 07652248)
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