



Notice of intention to claim drawback

For HMRC use only. NOI reference number

When to use this form

Use this form for drawback claims that will be made under the Excise Goods (Drawback) Regulations 1995 and Excise Notice 207: Excise Duty drawback.

You will not be sent a claim form to claim drawback on the excise goods shown on this form until you have supplied all of the information.

For more information or help please phone our helpline on 0300 200 3700, Monday to Friday, 8am to 6pm.

When you've filled in and signed this form send it to:

HM Revenue and Customs
Excise Processing Team
BX9 1GL

Your rights and obligations

'HMRC Charter' explains what you can expect from us and what we expect from you. For more information, go to www.gov.uk/government/publications/hmrc-charter

Drawback claimant details

VAT Registration Number

Name of drawback claimant

Nature of business

Your reference number this is the number you'll give this claim to identify it in your own records

Address

Contact details

Goods bought from

If there is more than one supplier attach a separate schedule giving details of all suppliers.

VAT Registration Number

Full company name

Address

Contact details

Tick this box if you're a registered brewer offsetting this claim on your EX46 return

I am intending to claim drawback on the following goods:

	Type of Excise goods (see note below*)	Brand name or exact type	Size of unit	Number of units	Alcohol by volume (% abv)	Amount of duty paid (£)	Description of packaging
1							
2							
3							
4							
5							
6							
7							
8							
9							
10							
11							
12							

*Type of Excise goods are spirits, wine, made-wine, beer, cider, perry, cigarettes, other tobacco and oil.

Where goods are available for inspection

VAT Registration Number

<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
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Full company name

<input type="text"/>
<input type="text"/>
<input type="text"/>

Address

<input type="text"/>
<input type="text"/>
<input type="text"/>
<input type="text"/>
<input type="text"/>
<input type="text"/>

Postcode

Contact details

Phone

Fax

Email

Declaration

I declare that the information I have given on this form is complete and correct.

I have read and understood Excise Notice 207: Excise Duty drawback and I understand this notice of intention will form part of my claim for drawback.

Full name use capital letters

<input type="text"/>
<input type="text"/>

Signature

<input type="text"/>

Position in company use capital letters

<input type="text"/>

Date DD MM YYYY

<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
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