



For help filling in this form, go to www.gov.uk, search for 'DS1' and read the Register for Duty Stamps Scheme notes.

About the business

1 Business name

For partnerships, provide details of partners on the continuation sheet at appendix A, page 4

2 Trading name, if different from above

3 Address of registered office or residence

Postcode

Country

4 Address of principal place of business, if different from registered office or residence address

Postcode

Country

5 Business phone number, include country and area code

6 Business fax number

7 Website address

8 Email address

9 Legal status of your business, put an 'X' in one box

Sole proprietor ☐ Partnership ☐

Corporate body ☐ Other ☐

If Other, give details below

10 Incorporation number

11 Date of incorporation DD MM YYYY

12 Country of incorporation

13 UK VAT Registration Number, if applicable

14 Excise ID number, if applicable

15 Nature of business, put an 'X' in any box that applies

UK businesses

Authorised warehousekeeper ☐

Bottler of duty-paid spirits ☐

Compounder ☐

Holder of Excise licence to produce wine or made-wine ☐

Other importer ☐

Owner of goods in warehouse ☐

About the business continued

Non-UK businesses

Bottler ☐

Distiller ☐

Manufacturer ☐

Type of stamp

Freestanding Duty Stamps (Type A)

- 16 Do you seek authority to obtain freestanding Duty Stamps?

No ☐ Yes ☐

- 17 How many freestanding Duty Stamps do you expect to obtain during the 12 months following the date of your application for registration?

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- 18 If you had been required to obtain freestanding Duty Stamps in the 12 months preceding the date of application, how many would you have affixed to retail containers during that time?

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Label Stamps (Type B)

- 19 Do you seek authority to incorporate Duty Stamps into labels?

No ☐ Yes ☐

If No, go to question 26 on page 3.

- 20 Do you intend to authorise another business to incorporate Duty Stamps into labels on your behalf?

No ☐ Yes ☐

If No, go to question 26 on page 3.

If Yes, continue to question 21.

Businesses incorporating Duty Stamps into labels

Only complete this section if you intend to authorise another business to incorporate Duty Stamp labels on your behalf

- 21 Business name

- 22 Trading name, if different from above

- 23 Address of registered office or residence

Postcode

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Country

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- 24 Address of principal place of business, if different from registered office or residence address

Postcode

--	--	--	--	--	--	--	--

Country

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- 25 Business phone number, include country and area code

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To enter more businesses, go to the continuation sheet at appendix B, page 5.

Additional information

26 Have you been notified of an assessment to a civil penalty in the last 5 years?

No ☐ Yes ☐

27 If Yes, were all such penalties subsequently paid, withdrawn or quashed?

No ☐ Yes ☐

If you answered Yes to box 26 and No to box 27, please confirm, for those penalties that were not paid, withdrawn or quashed:

- the dates that we notified you of the penalties
- the amount of the penalties
- the reason you were liable to the penalties, for example, failure to keep correct records as prescribed by regulations
- the dates the penalties were paid

Use the continuation sheet at appendix C, page 5.

28 Have you had anything that was in your custody or under your control seized in the last 5 years?

No ☐ Yes ☐

29 If Yes, were all items subsequently returned to you?

No ☐ Yes ☐

If you answered Yes to box 28 and No to box 29, please confirm, for those items that were not returned to you:

- the dates the items were seized
- the nature of the items seized
- the reason that the items were seized, for example goods prohibited from importation

Use the continuation sheet at appendix C, page 5.

Duty Stamps representatives

30 Do you intend to act as a Duty Stamps representative?

No ☐ Yes ☐

If No, go to the Declaration on page 4.

If Yes, you must provide details of all the principals that you will represent. If you act on behalf of more than one principal, complete the continuation sheet at appendix D, page 6.

31 Principal's full name, including title

32 Principal's trading name, if different from above

33 Principal's address of registered office or residence

Postcode

Country

34 Principal's address of place of business, if different from registered office or residence address

Postcode

Country

35 Principal's phone number, include country and area code

36 Principal's website address

Duty Stamps representatives continued

37 Box no longer in use

38 Principal's legal status, put an 'X' in one box

Sole proprietor

☐

Partnership

☐

Corporate body

☐

Other

☐

If Other, give details below

39 Principal's nature of business, put an 'X' in any box that applies

Bottler

☐

Distiller

☐

Manufacturer

☐

Declaration

I declare that the information given on this form and in any accompanying document is true and complete and that the applicant is not disqualified from being registered for Duty Stamp purposes.

40 Full name, including title

41 Capacity in which signed
For example, sole proprietor, director

42 Contact phone number, include country and area code

43 Signature

44 Date DD MM YYYY

Appendix A

Continuation sheet for 'About the business'.

1 Full name of partner, including title

2 Full name of partner, including title

3 Full name of partner, including title

4 Full name of partner, including title

5 Full name of partner, including title

6 Full name of partner, including title

7 Full name of partner, including title

8 Full name of partner, including title

9 Full name of partner, including title

10 Full name of partner, including title

Appendix B

Continuation sheet for 'Businesses incorporating Duty Stamps into labels'.

1 Full business name

2 Full trading name, if different from above

3 Full address of registered office or residence

Postcode

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Country

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4 Full address of principal place of business, if different from registered office or residence address

Postcode

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Country

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5 Business phone number, include country and area code

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Appendix C

Continuation sheet for 'Additional information'.

Penalties that were not paid, withdrawn or quashed

1 Date we notified you of the penalty DD MM YYYY

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2 Amount of the penalty

£						•	0	0
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3 Reason you were liable to the penalty, for example, failure to keep correct records as prescribed by regulations

Seizures that were not returned

4 Date the items were seized DD MM YYYY

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5 Description of the items seized

6 Reason the items were seized
For example, goods prohibited from importation

To enter more than one business, reprint this sheet.

To enter more than one penalty or seizure, reprint this sheet.

Appendix D

Continuation sheet for 'Duty Stamps representatives'.

1 Principal's full name, including title

2 Principal's trading name, if different from above

3 Principal's registered office or residence

Postcode

Country

4 Principal's address of place of business,
if different from registered office or residence address

Postcode

Country

5 Principal's phone number, include country and area code

6 Principal's website address

7 Box no longer in use

8 Principal's legal status, put an 'X' in one box

Sole proprietor ☐ Partnership ☐

Corporate body ☐ Other ☐

If Other, give details below

9 Principal's nature of business, put an 'X' in any box
that applies

Bottler ☐

Distiller ☐

Manufacturer ☐

To enter more than one business, reprint this sheet.

Send the completed form and additional forms to:

HM Revenue and Customs
Excise Processing Team
BX9 1GL

For HMRC use only

Reference

Registration number