



### How to use this form

Use this form to request a refund of overpaid VAT and duty for goods declared through the Online Service for Passengers (OSP).

Complete all relevant sections as appropriate and attach the correct supporting documents. Incomplete forms may cause delays in the processing of your request.

The address to send your completed refund claim is at the end of this form.

### About you

<b>Name</b> <input type="text"/>	<b>Address</b> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> Postcode <input type="text"/>
<b>Phone number</b> <input type="text"/>	
<b>Email address</b> <input type="text"/>	

Please give details of one of the following:

<b>Passport Number</b> <input type="text"/>	<b>EU ID Card</b> <input type="text"/>
<b>Driver's license</b> <input type="text"/>	

### About your payment

<b>Date of arrival</b> DD MM YYYY <input type="text"/>	<b>Reference number</b> (this is 14 characters, made up of 4 letters then 10 numbers and begin with an 'X') <input type="text"/>
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<p><b>How did you make your declaration?</b> Put an 'X' in the box that applies</p> <p>Online <input type="checkbox"/></p> <p>To a Border Force at a red channel or red point phone <input type="checkbox"/></p> <p><b>If you made your declaration at a port or airport, please provide the location</b> <input type="text"/> <input type="text"/></p>	<p><b>What was the amount of your declaration?</b> <input type="text"/></p> <p><b>What was your original method of payment?</b> Put an 'X' in the box that applies</p> <p>Card <input type="checkbox"/>      Cash <input type="checkbox"/></p> <p>If your method of payment was by card, any refund will be made back to the card used to make the original payment.</p>
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## About your refund

### Are you requesting a full or part refund?

Put an 'X' in the box that applies

Full refund

Part refund

### Give the reason why a refund is being requested

Also tell us what the goods are and quantity of the goods. If you're requesting a partial refund, advise how much this is.


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## Declaration

Please complete and sign this declaration.

I declare that the information provided on this form is true and complete to the best of my knowledge and belief.

**Signature**

**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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**Full name**

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## What to do now

Please return the completed form to:

BT-NCH  
HM Revenue and Customs  
BX9 1GZ

When we get your completed form, we'll aim to deal with your claim within 30 days.

Please do not contact us before then.