

## **Certificate A**

## Purchase by an eligible body of medical or scientific equipment

Part 1 To be completed by the purchaser		Is the named organisation (put 'X' in one box)	
Full name		Buying	
		Hiring	
Status in the organisation		Provide their details below.	
		Name and address of supplier	
	_	Address	
		Address	
Name and address of the organisation			
Name	_	Postcode	
Address	_		
		Description of goods or services	
Postcode			
Type of organisation (put 'X' in one box)			
Health authority or special health authority in England or Wales			
Health Board in Scotland		<b>Type of equipment</b> (put 'X' in one box)	
Health and Social Services Board in Northern Ireland		Medical	
Hospital whose activities are not carried on for profit		Scientific	
Research institution whose activities are not carried on for profit		Computer	
		Video	
Charitable institution providing care or medical or			
surgical treatment for disabled people		Sterilising	
Common Services Agency for the Scottish		Scientific	
Health Service			
Northern Ireland Central Services Agency for Health and Social Services		Laboratory	
		Refrigeration	
Isle of Man Health Services Board		Darta or appropriate of the equipment	
		Parts or accessories of the equipment	
Charitable institution providing rescue or first aid services		Repairs or maintenance of the equipment	
National Lealth Comics truck set-blick should be Dutil for			
National Health Service trust established under Part I of the National Health Service and Community Care Act 1990			
or the National Health Service (Scotland) Act 1978			

Part 1 continued	Part 2 To be completed by the supplier	
Will the goods be used in (put 'X' in one box)	Declaration	
Medical research	I have read the guidance in Charity funded equipment for medical and veterinary uses (VAT Notice 701/6) and agree that the goods or services supplied come within the:	
Medical training		
Medical diagnosis	Category stated above	
Medical treatment	Other eligible category give details below	
Veterinary research	Description of equipment	
Veterinary training		
Laboratory equipment	Signature	
Veterinary diagnosis		
Veterinary treatment	Date DD MM YYYY	
Declaration		
I have read the guidance in Charity funded equipment for medical and veterinary uses (VAT Notice 701/6) and apply for zero rating of the supply under Group 15, items 5 or 6 of the	Any other information For example, any steps taken to verify the information on this form.	
zero rate Schedule to the VAT Act 1994.		
The above organisation is paying for this supply with funds provided entirely by a charity or from voluntary contributions.		
I understand it is the supplier's responsibility to make sure that the goods or services supplied are eligible before zero rating them.		
I declare that the information on this form is correct.		
Signature		
Date DD MM YYYY		