



Importation by an eligible body of medical or scientific equipment

Part 1 To be completed by the importer

Full name

Input fields for full name

Status in the organisation

Input fields for status in the organisation

Name and address of the organisation

Input fields for name and address of the organisation

Type of organisation (put 'X' in one box)

- List of eligible bodies with checkboxes: Health authority or special health authority in England or Wales, Health Board in Scotland, Health and Social Services Board in Northern Ireland, Hospital whose activities are not carried on for profit, Research institution whose activities are not carried on for profit, Charitable institution providing care, medical or surgical treatment for disabled people, Common Services Agency for the Scottish Health Service, Northern Ireland Central Services Agency for Health and Social Services, Isle of Man Health Services Board, Charitable institution providing rescue or first aid services, 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

Description of goods being imported

Input fields for description of goods being imported

Type of equipment (put 'X' in one box)

- List of equipment types with checkboxes: Medical, Scientific, Computer, Video, Sterilising, Laboratory, Refrigeration, Parts or accessories for the equipment

Goods to be used in (put 'X' in one box)

- List of goods to be used in with checkboxes: Medical research, Medical training, Medical diagnosis, Medical treatment, Veterinary research, Veterinary training, Veterinary diagnosis, Veterinary treatment

Part 1 continued

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, item 5 of the 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 declare that the information on this form is correct.

Signature

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Date DD MM YYYY

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Part 2 For use by HM Revenue and Customs

Any other information

For example, any steps taken to verify the information on this form.
