## ELIGIBILITY DECLARATIONS FOR GOODS AND SERVICES FOR DISABLED PEOPLE AND CHARITIES SERVING THEIR NEEDS

## Please note there are penalties for making false declarations

If you are in any doubt as to whether you are eligible to should consult VAT Notice 701/7 VAT relief's for disabled pound 9000 before signing the declaration.			
I	[Full Name]		
of 🗵 [	Full Address]		
Declare that I am chronically sick or have a disabling condi	_	n of: 🛛	[Give full & specific description of your condition]
And, that I am receiving from: SENSORIUM LIMI Street, Dunfermli			use, 9 Nethertown Broad
* The following goods, which are being supplied to me			
* The following services of installation, repair or mainte	enance of good	ds:	
* Delete as appropriate.			
Description of Goods/Services/:			
And I claim relief from value added tax.			
	×	(Signa	ture)
	×	(Date)	
This form may be completed by individuals' guardian or appreciated be stated clearly.	pointed carer.	Their re	elationship to the individual
* Please complete this form fu and return with your order either by			
For internal use only			
On behalf of Sensorium Limited:			
[Signature]			