

**VAT EXEMPTION CERTIFICATE**

Goods and services for disabled persons: Eligibility declaration by an individual

I (Full name)  
Of (address)

[Empty box for name and address]

Postcode  
Tel:

I declare that I am chronically sick or disabled by reason of: (give a full and specific description of your condition)

[Empty box for condition description]

and that I am receiving from: Medpage Limited T/A Easylink UK

- The following goods which are being supplied to me for domestic or my personal use: (Description of goods)

[Empty box for goods description]

- The following services to adapt goods to suit my condition: (description of services and Goods)

[Empty box for services description]

- The following services of installation, repair or maintenance of goods: (description of services and goods)

[Empty box for installation services description]

And I claim relief from value added tax under Group 14 of Schedule 5 to the Value Added Tax Act 1983.

Signature or E-mail address

Date:

[Empty box for signature or email address]

[Empty box for date]

Warning: Section 39.2. of the VAT Act 1983 provides for severe penalties for anyone who makes use of a document which they know to be false for the purposes of obtaining VAT relief.

VAT EXEMPTION CERTIFICATE  
 Return the completed form to:  
 Medpage Limited T/A Easylink UK  
 3 Melbourne House  
 Corby Gate Business Park  
 Corby  
 Northants  
 NN17 5JG  
 Fax 01536 269 719  
 Email: vatrelief@easylinkuk.co.uk

Office Use Only

Sales order number:

[Empty box for office use only and sales order number]