



# Customer VAT Declaration Form

If a parent, spouse or guardian is purchasing the bed on behalf of the customer, they must complete and sign this declaration. Otherwise, the customer must complete and sign this declaration.

### 1. Customer Declaration

The claimant (full name) .....

Of (address) .....

..... Postcode.....

declares that he/she is chronically sick or disabled as: (tick as relevant)

- a) He/she has a physical or mental impairment which has a long-term and substantial adverse effect on his/her ability to carry out everyday activities;
- b) He/she has a condition which the medical profession treats as a chronic sickness;
- c) He/she is terminally ill;


By reason of:

(Please give a full and specific description of your condition) .....

### 2. Bed for domestic or personal use

The customer is receiving from Dreams Ltd an electrically or mechanically adjustable bed designed for disabled people and declares that he/she is purchasing the bed for his/her domestic or personal use. Accordingly, the customer claims relief from value added tax.

### 3. Evidence of disability

The customer provides one of the following document as evidence of disability: (tick as relevant)

- a) A letter from his/her GP confirming your purchase in beneficial for your condition (See guidance).
- b) A valid Disabled Parking Permit.
- c) Proof that the customer is receiving Disability Benefit/ a Personal Independence Payment.


NB: We are unable to process your claim without documentary evidence of your eligibility. All evidence must be valid within 3 months of the purchase date.

### 4. Claimant/ Purchaser signature

(Claimant/Purchaser Signature)..... (Date).....

Sales Order Number:	Purchaser Name:
	Relationship to Claimant: (If different to the above)

If you are in any doubt as to whether you are eligible to receive goods or services zero-rated for VAT you should consult Notice 701/7 VAT reliefs for disabled people or contact our National Advice Service on 0845 010 9000 before signing the declaration. Please note there are penalties for making false declarations.

If the original purchase was made by card your refund will be credited back to that card. Please provide your card details below

Card No:																		Expiry Date	/
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FOR OFFICE USE ONLY

**1. Retailer**

We, Dreams Ltd of Knaves Beech, High Wycombe, Bucks, HP10 9YU are supplying to the person named above a mechanically adjustable bed designed for disabled people of the following make and model:

.....

for the domestic or personal use of the disabled person.

..... (Signature) on Behalf Of Dreams Ltd

.....(Name).....(User ID).....(Date)

Refund Details						
Amount	Payment method			Checked By	Date	Authorising Signatory
	Card <input type="radio"/>	Cheque <input type="radio"/>	Chq No.		/ /	

## **Doctors letter guidance to the customer to obtain VAT Disability Relief**

### **Reference to point 3, Evidence of disability**

Please read this guidance if you are intending to certify your chronic illness or disability with a GP letter.

If you wish to apply for a VAT refund in respect of the purchase of an adjustable bed, you must provide evidence of your chronic illness or disability.

For clarity, this relief is not available for an elderly person who is not disabled or chronically sick nor any person who is only temporarily disabled or incapacitated, such as with a broken limb.

If you use a letter from your GP, in order to qualify as valid evidence for VAT purposes, the GP letter must contain the following features:

- The letter must describe the nature of your illness or disability.
- The letter must state that, in the GP's opinion, this condition constitutes a chronic illness or disability.
- The letter must be on the letterhead of your GP's surgery.
- The letter must be signed by your GP, and be dated within 2 months of the date of your purchase.

For VAT Disability Relief, a person is considered 'chronically sick or disabled' if he or she is a person with a physical or mental impairment which has a long-term and substantial adverse effect upon her/his ability to carry out everyday activities or is a person with a medical condition which the medical profession treats as a chronic sickness, such as diabetes.