

# ZERO VAT DECLARATION FORM

If you have completed your order using ZERO RATED VAT prices you must fill in this declaration.

I..... of the above address declare that I am chronically sick or disabled OR

I am using funds belonging to the person who suffers from incontinence

I am purchasing for my child/ren who suffers from incontinence

NAME OF PERSON WHO WILL BE USING THE PRODUCT .....  
.....

ADDRESS OF PERSON WHO WILL BE USING THE PRODUCT IF DIFFERENT FROM ABOVE:

.....  
.....  
.....

and that I am receiving from Incy Wincy, 18 Oregon Avenue, Tilehurst, Reading, RG31 6RZ VAT Reg no: 642 339 52, incontinence products and claim that the supply of these goods is eligible for relief from Value Added Tax under group 12 of schedule 8 to the Value Added Tax Act 1994.

Signature ..... Date .....

There are severe penalties for making a false declaration. If you are in any doubt about your own eligibility or the eligibility of the goods that you are buying, you should get advice from your local Vat office before signing this declaration.

Incy Wincy Swimming Products for Children, 18 Oregon Avenue, Tilehurst, Reading, RG31 6RZ,  
Tel: 0118 377 3581 Fax: 0118 942 8897 Email [info@incywincy.net](mailto:info@incywincy.net) [www.incywincy.net](http://www.incywincy.net)