

VAT Relief – Claim Form

Customer Name:

Customer Surname:

Address Line 1:

Address Line 2:

Postcode:

Please Tick one of the following options:

I declare that I/Customer qualify for VAT Relief, based on the information below.

Health Condition(s):

I/Customer do not qualify for VAT Relief.

Signed:

Date:

If you have any problems completing this form, then please phone us on 0333 3058200.

Please return this form to:

Bathroom Takeaway. Unit 16, Floats Road. Roundthorn Industrial Estate. Wythenshawe. Manchester. M23 9LJ.

Alternatively, you can print and scan it and email it to sales@bathroomtakeaway.co.uk