



**VAT Exemption Certificate**

**Customer**

I (full name): .....

Of (address): .....

.....

.....

.....

Declare that:

I have the following disability or chronic sickness

.....

I am receiving from: ZTW Mobility, 125 Lawn Lane, Hemel Hempstead, Herts, HP3 9HS

The following goods, which are being supplied to me for domestic or my personal use:

.....

The following services of installation, repair or maintenance of goods:

.....

And I claim relief from Value Added Tax.

Signature: .....

Date: .....

**Please note there are penalties for making false declarations**

If you are in any doubt as to whether you are eligible to receive goods or services zero-rated for VAT you should consult VAT Notice 701/7 relief's for disabled people or contact the National Advice Services on 0845 010 9000 before signing the declaration.

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**Supplier**

ZTW Mobility of 125 Lawn Lane, Hemel Hempstead, Herts, HP3 9HS  
are supplying to the person named above the following goods and/or services for their personal use.

Goods/Services: .....

Signature: .....

Date: .....

Invoice No: .....