



ORDER FORM

Invoice Address (please complete in block capitals)	Delivery Address (If different)
Charity Name:	Title:
Filled In By:	First Name:
Purchasing On Behalf Of: (i.e. client name)	Surname:
Charity Address:	Address:
Telephone Number:	Telephone Number:
Email Address:	Email Address:

CODE	DESCRIPTION	QTY	UNIT PRICE	TOTAL PRICE
	Above items to fit push/wheelchair with serial number/s:	N/A	N/A	N/A

Please make your cheque/postal order payable to **Tendercare Ltd** and return your completed order and VAT exemption form to:

Tendercare Ltd
PO BOX 3091
Littlehampton
BN16 2WF

SUB TOTAL	£
POSTAGE & PACKAGING	£
GRAND TOTAL	£

Tendercare Ltd – VAT Zero Rating Form

Email: sales@tendercareltd.com Phone: 01903 726161

Please only fill this form in if you are eligible to be exempt from Value Added Tax. There are several penalties for making a false declaration. If you are in any doubt about your charity's eligibility or the eligibility of the goods or services you are buying, you should get advice from any local VAT office before signing this declaration.

Please be advised, we will only use your data for the purpose of fulfilling your order

Charity Name:

Registered Charity Number:

Address:

We declare we are eligible charity under VAT Notice 701/1 and the goods supplied are for the 'domestic or personal use' of a 'chronically sick or disabled' person and these goods are eligible for relief from Value Added Tax under Group 12 of the Value Added Tax Act 1994 and the charity are receiving these goods from:

Tendercare Ltd

PO BOX 3091

Littlehampton

BN16 2WF

Signed By (please print your name):

Signature:

Date: