

## MINISTRY OF FINANCE VALUE ADDED TAX DEPARTMENT APPLICATION FOR TAX FREE SCHEME

A. TAXPAYER INFORMATION		
1. Tax Identification Number		
2. Individual or Registered Name		
3. Trade Name		
4. Business Address		
5. Name and address of branches requesting Tax Free Scheme		

6. Does all branches have the ability to produce electronic records and receipts?	
○ Yes	○ No
b. If yes, by what method	
	I have the ability to digitally capture and store documentation of visitors tation directly to the visitor's specific purchase(s)?
<b>○</b> Yes	○ No
b. If yes, by what method	
B. CERTIFICATION	
We declare that we have read \ that are eligible for this scheme potential VAT payable on sales	VAT Rule 2015-026 – VAT Free Shopping and are aware of the goods e. We hereby agree to a payment of a 15% monthly service fee on all s of zero rated tourist goods. We understand that this monthly fee is nonth, and if not paid merchants can be suspended from the benefits
	ormation provided is true, correct and complete to the best of our we have the authority to make this disclosure of information and except full responsibility for any infractions in relation to the VAT Rules ree Shopping Scheme.
9. Full Name	
10. Registrant Signature	11. Date (dd/mm/yyyy)