

Form No.38 VAT/ In replying please quote this number

VALUE ADDED TAX UNIT P.O. Box N-3017

TEL: (242) 461-4050 (242) 225-7280 FAX: (242) 361-4034 EMAIL: VAT@bahamas.gov.bs NASSAU, BAHAMAS

APPLICATION FOR DEFERAL OF IMPORT VAT IN ACCORDANCE WITH SECTION 44 (4) OF THE VALUE ADDED TAX 2014

(THIS FORM IS RESERVED FOR APPLICANTS SEEKING DEFERMENT OF VAT PAYABLE ON THE IMPORTATION OF GOODS)

1. Name of Applicant (Individual or Compa	any):	
Street / Postal Address of Business:		
O . N/AT TINI N .		
2. VAT TIN No:		
3 Business Licence No:(Please pro	ovide a valid copy of your Busine	ss Licence)
4. National Insurance No: (Please attached proof the	nat National Insurance contributio	ons are current)
 5. Name of Deferment Scheme: The Hotels Encouragement Act The Industries Encouragement Act Port Licensee under the Hawksbill Cree Approved goods for authorized sellers Approved Resellers of Automobiles 	,	goods
Signature of Applicant:	Date:	
FOR OFFICIAL USE ONLY		
To: Comptroller of Customs Nassau, Bahamas		
Under the provisions of Section 44 (4) of approved the attached listed items for E person or company.		
This approval is VALID from	(date) to	(date).
	Signed:	

VAT COMPTROLLER