



ZANZIBAR REVENUE BOARD

VALUE ADDED TAX DEPARTMENT (VAT)

(Complete in Quadruplicate)

To: Commissioner
P.O. Box 2072,
Zanzibar.

APPLICATION FOR UTILIZATION OF VAT RELIEF GRANTED TO TECHNICAL ASSISTANCE PROJECT MATERIALS AND EQUIPMENT

PART A: (to be completed by applicant)

The (name of the Organization).....

Is applying for VAT relief on the materials/equipment/ motor vehicle(s) as detailed below

The goods are going to be used by the (name of the project)

.....
Which is a project aided pursuant to the agreement/ memorandum of understanding between the

And the United Republic of Tanzania/Zanzibar Government dated

For (state the used of the goods)

Details of the goods		Value exclusive of VAT (in T. Shs.)	Supplier
Description	Quantity		

In case or a motor vehicle give the following details (in separate set for each vehicle);

Make..... Type.....

Engine No..... Chassis No

Tare weight..... Cubic Capacity.....

Year of Manufacture..... Propulsion Petrol/Diesel/Other

We do certify that the above information/ data is correct and that we are entitled to VAT relief. We undertake not to sell, transfer or dispose in any way the said goods unless and until VAT is paid.

Date.....

.....
Signature and Stamp of Applicant

PART B: (To be completed by the Recipient Organisation / Ministry / Parastatal)

This is to certify that (name of project)..... is a technical assistance project which is under our Ministry/Organization (name)..... under the agreement Between and which was confirmed by the Treasury as per Treasury letter Ref No. ofand/or per Govt. Notice No.ofWe do confirm that the above materials/equipment/motor vehicle (s) are project materials as referred to under article No.....of the said agreement and they are going to be used in the said project. We therefore recommend that they be supplied free of VAT as article No.We hereby undertake not to sell, transfer, or dispose in any other way the said goods unless and until the VAT is paid.

Date.....

.....
**Signature and Stamp of Ministry/
Parastatal Organisation /
Principal Secretary / General Manager**

FOR OFFICIAL USE ONLY:

PART C: (To be completed by the VAT Operation Officer incharge)
To the Commissioner

I, (Full names of the VAT Operation Officer)
do hereby recommend the approval of VAT relief to.....
.....

In accordance with article No.of the agreement referred to in Treasury's letter Ref. No. of.....

Date.....

.....
Signature and Stamp of the VOI

PART D: COMMISSIONER

Approval has been/not been granted for VAT relief to.....
.....

Date.....

.....
**Signature and Stamp of the
Commissioner**

Distribution: Original - Commissioner
Duplicate - VAT Operation Officer Inchange
Triplicate - Supplier of goods
Quadruplicate - Applicant